



**Western Cape  
Government**

Education

**WESTERN CAPE EDUCATION DEPARTMENT  
SPECIALISED EDUCATION SUPPORT**

**GUIDELINES FOR THE MANAGEMENT AND ADMINISTERING OF MEDICATION IN  
PUBLIC SCHOOLS**

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# GUIDELINES FOR THE MANAGEMENT AND ADMINISTERING OF MEDICATION IN PUBLIC SCHOOLS

## 1. INTRODUCTION

1.1 *As a general rule, but subject to a school policy and unless authorized by the school principal, public schools are not to administer prescription medication to learners.*

1.2 However, the management and administering of medication to learners, while on school premises, has become an inescapable reality for schools.

1.3 The health circumstances that require medication are diverse, and many learners with special health care needs are able to attend school because of the effectiveness of their medication at home, school and/or special school.

1.4 Good health and safety are essential to learning.

1.5 The administering of medication during the school day is essential to allow some learners the opportunity to attend school and participate in the full range of school activities, such as classroom learning activities, excursions, swimming, sport, physical education, outdoor and vocational school activities.

## 2. SCOPE AND APPLICATION

2.1 These guidelines apply to all public schools, heads and senior management school personnel, and allied health professionals of WCED institutions in the Western Cape, and are designed to, *inter alia*

- a. promote the rights of the child/ learner;
- b. promote the normalization and acceptance of health conditions in public schools;

- c. prohibit and discourage discrimination against learners requiring medication or with a health condition;
- d. inform parents, caregivers, educators and learners about procedures for the management of health conditions and administering of medication;
- e. create optimal opportunities for learners requiring medication, and learners with health conditions to participate in the full range of school activities;
- f. ensure that the administering of medication and other health condition management procedures promotes and respects the privacy and dignity of learners at all times;
- g. ensure parents, learners and educators are informed of warning signs, triggers and emergency responses for health conditions requiring medication or other management, of which the school has been advised;
- h. ensure designated first aid personnel in the school are trained in recognition and management of an emergency for learners and staff;
- i. ensure all staff have access to basic skills and information about medication or other management procedures for health conditions known to be present in the school;
- j. require all school activities (including excursions, camps, physical education, swimming, sport, and outdoor education), to include a planning component addressing the needs of learners requiring medication or management of a health condition; and
- k. establish monitoring procedures for *storage* of medication at schools.

## **DEFINITIONS**

**“*Bill of Rights*”** means the Bill of Rights contained in Chapter 2 of the Constitution.

**“Constitution”** means the Constitution of the Republic of South Africa, 1996 (Act 108 of 1996).

**“care”** in relation to a child includes, where appropriate,

- safeguarding and promoting the well-being of the child;
- respecting, protecting, promoting and securing the fulfilment of, and guarding against any infringement of, the child’s rights set out in the Bill of Rights and the principles set out in Chapter 2 of Act 108 of 1996.
- guiding and securing the child’s education and upbringing, including religious and cultural education and upbringing, in a manner appropriate to the child’s age, maturity and stage of development.

**“communicable disease”** means a disease, resulting from pathogenic elements, agents or toxins generated by infection, which are directly or indirectly transmitted from the source to the host.

**“medical practitioner”** means a person registered as a medical practitioner under the Health Professions Act, 1974 (Act No. 56 of 1974) and includes a dentist so registered or deemed to be registered.

**“education department”** means the department established by section 7 (2) of the Public Service Act, 1994 (Proclamation 103 of 1994), which is responsible for education in a province.

**“educator”** means any person, excluding a person who is appointed to exclusively perform extracurricular duties, who teaches, educates or trains other persons or who provides professional education services, including professional therapy and education psychological services, at a school.

**“essential health services”** means those services prescribed by the Minister to be essential health services after consultation with the National Health Council.

**“governing body”** means a governing body contemplated in section 16 (1) *South African Schools Act, 1996* (Act No. 84 of 1996).

**“health agency”** means any person other than a health establishment (a) whose business involves the supply of health care personnel to users or health establishments; (b) who employs health care personnel for the purpose of providing health services; or (c) who procures health care personnel or health services for the benefit of a user, and includes a temporary employment service, as defined in the *Basic Conditions of Employment Act, 1997* (Act No. 75 of 1997), involving health workers or health care providers.

**“health care provider”** means a person providing health services in terms of a law, including in terms of (a) the *Allied Health Professions Act, 1982* (Act No. 63 of 1982); (b) the *Health Professions Act, 1974* (Act No. 56 of 1974); (c) the *Nursing Act, 1978* (Act No. 50 of 1978); the *Pharmacy Act, 1974* (Act No. 53 of 1974); and (e) the *Dental Technicians Act, 1979* (Act No. 19 of 1979).

**“health nuisance”** means a situation, or state of affairs, that endangers life or health or adversely affects the well-being of a person or community.

**“health services”** means (a) health care services, including reproductive health care and emergency medical treatment, contemplated in section 27 of the Constitution; (b) basic nutrition and basic health care services contemplated in section 28 (1)(c) of the Constitution; and (c) medical treatment contemplated in section 35(2)(e) of the Constitution; and municipal health services.

**“illegal drug”** means, (a) any unlawful substance that has a psychological or physiological effect or (b) any substance possessed unlawfully that has such effect.

**“non-communicable disease”** means a disease or health condition that cannot be contracted from another person, animal or directly from the environment.

**“parent”** in terms of the *South African Schools Act, 1996* (Act No. 84 of 1996), means (a) the parent or guardian of a learner; (b) the person legally entitled to custody of a learner; or (c) the person who undertakes to fulfil the obligations of a person referred to in paragraphs (a) and (b) towards the learner’s education at school.

**“prescribed”** means prescribed by regulation made under section 90 of the National Health Act, 2003.

**“officer”** means an employee of an education department appointed in terms of the Employment of the Educators Act, 1994 (Act No.76 of 1998), or the Public Service Act, 1994 (Proclamation 103 of 1994).

**“primary health care services”** means such health services as may be prescribed by the Minister to be primary health care services.

**“school”** means a public school or an independent school which enrolls learners in one or more grades from Grade R (Reception Grade) to Grade 12.

**“school activity”** means any educational, cultural, sporting, fundraising or social activity of the school within or outside the premises of the school.

**“user”** means the person receiving treatment in a health establishment, including receiving blood or blood products, or using a health service, and, if the person receiving treatment or using a health service is

- (a) below the age contemplated in section 39(4) of the Child Care Act, 1983 (Act No.74 of 1983), “user” includes the person’s parent or guardian or another person authorized by law to act on the first mentioned person’s behalf; or
- (b) incapable of taking decisions, “user” includes the person’s spouse or partner or, in the absence of such spouse or partner, the person’s parent, grandparent, adult child or brother or sister, or another person authorized by law to act on the first mentioned person’s behalf.

### **3 PURPOSE OF THE GUIDELINES**

3.1 The purpose of these guidelines is to assist public schools in the Western Cape to develop and adopt own policies for the management and administering of medication (prescription and non-prescription medication, self administering and emergency procedures).

### **4. ABBREVIATIONS**

- WCED :** Western Cape Education Department
- SASA :** South African Schools Act
- ECD :** early childhood development
- SMT :** school management team
- SGB :** school governing body

### **5. GUIDING PRINCIPLES**

5.1 Schools have to create a climate in which teaching and learning can take place effectively. It is not the duty of the school to diagnose and treat the chronic or acute health conditions of learners, teachers and non-teaching personnel. However, the ability of many learners to engage actively in learning is influenced by their physical, mental and behavioural well-being and, as such, becomes the responsibility of the school.

5.2 The WCED understands that recent changes in legislation on the administering of medication have implications for health practices in schools.

5.3 Consequently, these guidelines seek to establish a framework for the safe administering, control and dispensing of medication to learners requiring such medication, and to ensure that all medication is kept and administered in the best interest of the learner, school, school personnel, and compliance with risk management procedures contained in the Regulations for Safety Measures at Public Schools (South African Schools Act, 84 of 1996).

## **6. ADMINISTERING OF MEDICATION IN PUBLIC SCHOOLS**

### **6.1 Responsibilities of the school principal**

It is the professional responsibility of the principal under the authority of the Head of Education to provide the following:

#### 6.1.1 The school principal must

- (a) ensure the development, approval, advocacy, and enforcement of the school policy on the administering and management of medication;
- (b) advise and fully inform parents, educators and staff of the possible implications of the administering and management of medication to learners requiring prescribed medication at school;
- (c) designate and delegate to the member(s) of the school personnel willing to assist, the responsibility for the management and administering of medication at school with the requisite and necessary support and training and guidance;
- (d) oversee the administering and management of medication at the school;
- (e) when relevant, advise parents of learners requiring medication to submit signed requests to the school with up-to-date medical information on the administering of the medication to the learner concerned (type of medication, dosage and frequency of administering);



- (f) ensure that prescription medication is stored and kept in a secure but accessible place;
- (g) ensure that all copies of written medical advice, written requests from parents and any other relevant documentation in relation to the learner's health condition remain confidential, and are stored in a safe and secure manner; and
- (h) ensure that if a learner refuses to take medication on a given day, the learner is not forced to take the medication and that the parent of the learner is properly informed.

## **6.2 Public schools**

A public school, must take measures to ensure that

- 6.2.1 a learner is not denied access to schooling on the grounds of the need for the administering of medication unless it can be comprehensively shown that the school cannot provide for the safe administering of medication while the child is at school, and that alternative arrangements cannot be made;
- 6.2.2 it provides support without discrimination to learners requiring medication while at school;
- 6.2.3 the school community is informed, and complies with the requirements and procedures for the management and administering of medication at school;
- 6.2.4 no prescription or non-prescription medication is administered to a learner without the prior written request or consent of the parent, and where applicable, with an indication of potential side effects or adverse reactions;
- 6.2.5 if a learner is on medication and will require medication during the course of school activities, the parent has ensured that the learner has sufficient quantities of the medication for the duration of the school activities;

- 6.2.6 if it is necessary for a learner to carry a doctor's prescription for medication, the parent has provided the learner and the supervising educator with certified copies of such prescription;
- 6.2.7 if a learner is injured or falls ill during the course of a school activity and requires medical treatment, the supervising educator
- takes measures to contact the parent of the learner concerned in order to obtain consent for such medical treatment; and
  - determines whether or not to consent to such medical treatment if he or she is unable to contact the parent of a learner.

Furthermore, with regard to the storage and handling of medication at school, a public school must ensure that

- 6.2.8. the amount of medication on hand should be kept to a minimum;
- 6.2.9 all medication must be marked, clearly labelled, and kept in the original container;
- 6.2.10 administering errors are recorded, e.g. administering of wrong medication to a learner, administering medication at wrong or inappropriate times, missing a dose, giving a wrong dose, etc. (In such cases, the parent of the learner and the principal must be notified immediately, and the learner be placed under observation for any adverse reactions and where necessary, and in case of severe adverse reactions, e.g. difficulty breathing or swallowing, or extreme swelling, that emergency services are contacted immediately.);
- 6.2.11 where medication is no longer required, i.e. in case of short-term (or acute) medication, the school is advised, in writing, by the parent concerned, who must also collect the balance from the school in person; and
- 6.2.12 it draws up a protocol outlining the responsibilities of the supervising educator and/or any member of school personnel responsible for the safe-guarding of the medication.

### **6.3 Duties and responsibilities of the parent or caregiver towards the learner**

- 6.3.1 The primary responsibility for the health and well-being of the child rests with the parent or caregiver of the learner concerned.
- 6.3.2 Parents or caregivers must, as a general rule, in instances or cases of serious ill health, allow the child to remain at home until full recovery, under the parent's or caregiver's care.
- 6.3.3 Where a learner suffers from a chronic health condition or short-term illness, which acquires access and regular intake of medication, the parent or caregiver has a duty to
- (a) notify the school, in writing, of the learner's health condition requiring medication at school, and request the school to administer or assist in the management of the health condition;
  - (b) make the school aware of any relevant requests or guidelines from the medical practitioner, including potential side effects or adverse reactions;
  - (c) provide medication in the original labelled container by the pharmacy community health centre or hospital to the school (The label must include the learner's name, medical practitioner or pharmacy name, directions for dosage and date of prescription);
  - (d) ensure medication is not out of date (expired), and that it is accompanied by an original pharmacy's or doctor's label with the learner's name, dosage and time to be taken;
  - (e) notify the school, in writing, when a change of dosage is required (accompanied by a Pharmacy/Doctor's prescription).
  - (f) where medication is no longer required, advise the school of this in writing and collect the balance of medication from school; and
  - (g) where possible, administer all initial doses of medication at home or at a community health centre or hospital prior to it being administered at school.

## **6.4 Educators or staff assisting in the administering of medication at public schools**

- 6.4.1 Educators or staff at the school are in *loco parentis* as regards learners during school hours and school activities, which imposes a duty of care upon the educators and staff of a public school.
- 6.4.2 As a result, educators and staff, must exercise at least the same foresight and care as a reasonably careful parent would in relation to his or her own children. To this end, educators and staff at the school must, *inter alia*,
- (a) administer medication directly from an original pharmacy-supplied container in a hygienic manner;
  - (b) follow directions on the original pharmacy label attached to the medication container;
  - (c) enter details of all medication administered in a register;
  - (d) participate in training from a qualified person addressing issues such as storage, dosage and administering of medication in relation to specialized health conditions;
  - (e) provide emergency first aid to a learner in response to emergency situations and, consent, on behalf of the learner, in an emergency and during school activities where the consent of a parent of the learner cannot be obtained; and
  - (f) ensure that confidentiality of the learner's health condition is maintained throughout.

## **6.5. Self medication**

- 6.5.1 As a general rule, all prescription and non-prescription medication brought to school, with the written consent of the parent, must be in an original or properly labelled container, including over-the counter medications, and handed over to the principal or his or her delegate.
- 6.5.2 Self medication occurs when a learner, of an appropriate age, with the parents informed consent and permission of the school, is allowed to take prescription and/or non-prescription medication without supervision.

- 6.5.3 Self medication applies to learners who, on evaluation by their medical practitioner and parent, and approved by the principal in consultation with the class teacher, are regarded as being capable of administering their own medication and recognizing signs, symptoms, possible side-effects and adverse responses associated with their condition (*monitoring blood sugar levels and the injection of insulin for diabetes: refer to the principles of universal precautions contained in the HIV/AIDS guidelines for schools; use of inhalants such as Ventolin or Venteze for asthma; use of nebulisers; oral administering of anti-convulsant medications for epilepsy, oral administering of enzyme replacement therapy for cystic fibrosis*).
- 6.5.4 Safe measures must still be implemented to reduce the risk of medication being used by other learners.

## 6.6 First Aid

- 6.6.1 Training (*both practical training, by the Department of Health or by WCED medical personnel at public schools, through the use of aids like videos, etc.*) in basic first-aid is recommended for school personnel, with supplementary training in the following:
- Methods of administering medication
  - Infection-control measures
  - Safe storage, handling and disposal of medication and/or equipment
  - Recognizing and handling side-effects
  - Emergency procedures
  - Managing refusal of medication by the learner
- 6.6.2 Where practicable, the school must provide the minimum contents of a first-aid kit, in terms of the General Safety Regulations, Occupational Health and Safety Act. The first-aid kit must contain, *inter alia*, the following:
- Wound cleaner or antiseptic (100ml)
  - Swabs for cleaning wounds
  - Cotton wool for padding (100g)
  - Sterilized gauze (minimum quantity 10)

- 1 pair of forceps (for splinters)
- 1 pair of scissors (minimum size 100mm)
- 1 set of safety pins
- 4 triangular bandages
- 4 roller bandages (75mm x 5mm)
- 1 roll of elastic adhesive (25mm x 3mm);
- 1 non-allergic adhesive strip (25mm x 3mm)
- 1 packet of adhesive dressing strips (minimum quantity 10 assorted sizes)
- 4 first – aid dressings (150mm x 200mm)
- 2 straight splints
- 2 pairs large and 2 pairs medium disposable latex gloves
- 2 CPR mouth pieces or similar devices

## **6.7 Emergency procedures (for known medical conditions at the school and in general)**

6.7.1 An emergency protocol, with detailed information on emergency care, first-aid, contact details of emergency services, details of a learner’s parent or caregiver and a provision for the recording of critical information about the emergency, must be created for the school. This particularly applies to the management of the following:

- **Asthma** : Ensure that the learner is not choking on or has not inhaled a foreign body that is obstructing the intake of air and restricting his or her ability to breathe easily. Advise the learner to sit down and to remain calm. Give the required number of puffs of inhaler, and should there be no improvement, call an ambulance immediately. Until emergency services arrive, the number of puffs taken and the times at which they were taken must be recorded.
- **Anaphylactic shock**: The school is advised to determine whether or not a learner has a history of anaphylactic shock (allergic reactions) prior to administering any medication. Records must be maintained for all learners of possible allergens (substances that cause allergic reactions) and the best management plan for each individual.
- **Bee stings**: Remove the sting by scraping it gently off the skin.
- **Food reaction**: Remove food from contact with the learners’ skin or mouth and wash the mouth. Do not induce vomiting. Follow all instructions as recommended by a medical practitioner or emergency services personnel.

- **Epilepsy:** In case of an epileptic attack on school premises, the member of school personnel nearest the scene of the attack should take careful note of the time and duration of the seizure, remove any hard objects from the learner or the vicinity, place something soft under the learners' head and loosen any tight clothing. Personnel are advised not to restrain the learner or force any objects into the learner's mouth. Once the seizure has stopped, allow the learner to rest until full recovery. If the seizure lasts more than five minutes, contact emergency services immediately.
- **Diabetes:** Treat as per the individual learners' management plan. If the learner is conscious, move the learner onto his or her side, ensure that the learner's airway is clear and contact emergency services immediately.

## **7. NON-COMPLIANCE AND REPORTING**

Where there has been serious non-compliance with the provisions of this guideline document by, a parent, health professional in the employ of the WCED, the principal and his or her delegate, the nature and reasons for non-compliance must be reported to the education district office for further investigation. Copies of the report must also be sent to the Directorate: Specialised Education Support (School Health Services Component), Directorate: Institutional Management and Governance Planning, and the Office of the Superintendent-General.

## **8. SUPPORT STRUCTURES**

The WCED, as the employer, is responsible for providing support to schools, who are encouraged to draw up their own school health and wellness policies which must outline procedures for administering medication in schools.

## **9 . ANNEXURES**

Examples of forms for schools (Forms 1 – 6), as well as a checklist, attached:

**Form 1: Example of a form for parent/guardian/caregiver to complete for the learner's self-administering of medication**

This form must be completed by the parent/guardian/caregiver and approved by a medical practitioner.

Learners' name: .....

Grade: ..... Name of class teacher: .....

Learner's residential address: .....

Condition or illness for which medication is required: .....

.....

Brand name of medication: .....

.....

Potential side-effects or adverse reactions to medication: .....

.....

What to do in an emergency: .....

.....

**CONTACT INFORMATION:**

Name parent/guardian/caregiver: .....

Contact number (in event of emergency): .....



Relationship to learner: .....

**Declaration:**

I, ....., would like my child ..... to keep his/her medication on him/her for use as necessary. He/she is capable of taking his/her own medication and I understand that the school cannot be held responsible for the use of, or failure of ..... (child's name) to use his/her medication while at school.

Signed: ..... Date: .....

Name of medical practitioner: .....

Contact number: .....

I, ....., support the recommendation that ..... administer his/her own medication while at school.

Signed: ..... Date: .....

**Form 2: Example of a form for parents to complete when requesting administering of medication by the school**

**Parents/guardians/caregivers please note:** The school can refuse to administer medication to your child if the form below is not completed by both you and your medical doctor. The school has the right to refuse to administer medication should all the conditions as described in the WCED guidelines not be met.

**Details of learner:**

Surname: ..... First name(s): .....

Learner's residential address: .....

Date of birth: ..... Male  Female

Grade: ..... Class teacher: .....

Condition or illness: .....

**Medication:**

Brand name of medication, as described on original container:

.....

Has a copy of the original script/prescription been provided to the school? .....

Date of script: ..... Date dispensed: .....

For how long will your child be taking this medication? .....

Full directions for use (as per script/medical practitioner)

Dosage: .....

Method of administering: .....

Frequency and time of administering (a.m./p.m./lunch break/etc.):

.....  
Special precautions/instructions (e.g. storage): .....  
.....

Possible side-effects: .....

Is the medication to be self-administered? Yes  No  (see Form 1)

Action to be taken in an emergency: .....  
.....

Allergies: .....

Name of prescribing medical practitioner: .....

Contact details: .....

Name of dispensing pharmacist: .....

Contact details: .....

**Contact Details (in case of emergency)**

Name of parent/guardian/caregiver: .....

Contact telephone number: .....

Relationship to learner: .....

**Declaration:**

I, ....., hereby request .....  
(Name of school) to administer the above-mentioned medication(s) to my child  
..... as detailed above.

I have read the recommended guidelines for the administering of medications by schools, and agree to the requirements of this guideline document. I understand that the school has the right to refuse to administer the medication if these requirements are not met. I understand that this request is valid for only one year, and will need to be reviewed and /or renewed annually.

**NOTE:**

- Medication must be supplied in the original container. Ask the pharmacist to supply medication in two fully labelled containers, one for home use and one for school use.
- Only medication authorized by a medical practitioner may be administered by school personnel.
- It is your responsibility to notify the school when there is a change in medication.
- It is your responsibility to provide all supplies, medication and/or equipment necessary for the administering of any medication(s), and to collect from the school any medication not used during the specified period.

I, ....., authorize the principal or designated school personnel member to contact the medical practitioner or pharmacist listed above in the event of illness or adverse reactions.

Signature: ..... Date: .....

**Form 3: Example of form to be completed by the school on agreeing to administer a medication**

**Declaration:**

As per your request, dated ....., the school governing body and school management team of ..... (*name of school*) agree to the following:

.....(*name of learner*) will receive .....(*dosage*)  
of .....(*name of medication*) every day at  
..... (*time of administering*) for the period  
.....(*the period for which chronic or acute medication must be taken*), or  
until instructed by the parent/guardian/caregiver or medical practitioner in writing.

Name of teacher/school personnel member responsible: .....

Signed: ..... Date: .....  
(Principal)

Signed: ..... Date: .....  
(School personnel member responsible)

Signed: ..... Date: .....  
(Member of SGB)

**Form 4: Example of a form on which the school records receipt of medication(s) from parent/guardian/caregiver**

Name of learner: ..... Grade: .....

Date received	Medication (name and dosage)	Amount supplied	Signature of parent/ guardian/ caregiver	Received by (signature & name)

**Form 5: Example of a form on which school records details of administering of medications to learners**

Date	Name of learner	Time	Name of medication	Dosage given	Dosage missed (reason)	Any reactions	Signature of school personnel member	Print Name

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**Form 6: Example of a form on which school records details of administering of chronic medication to an individual learner (to be kept with the learners' health record card in the learner's profile)**

Name of learner: ..... Grade: .....

Name of school personnel member responsible: .....

Name of medication	Time	Dosage given	Dosage missed (reason)	Any reactions	Signature of school personnel member *

## CHECKLIST FOR SCHOOLS ADMINISTERING MEDICATION

The following serves as a general guideline for the routine administering of all prescribed and non-prescribed medication within the school.

- Parents are provided with relevant information sheets, forms and letters.
- Contact details for parents/guardians/caregivers, medical practitioners and pharmacists are available and updated in case of an emergency.
- A venue has been selected for the administering of medication. The venue is private and easily accessible to learners and school personnel.
- Administering of medication occurs at a time suitable to both learners and school personnel, and when there is minimal disruption of teaching time.
- Administering of medication occurs, as far as possible, at the same time every day.
- Proper procedures for the verification of the identification of the learner, the prescribed medication and the dosage have been followed.
- A designated member of school personnel has been selected to administer medication.
- Should this member of school personnel be absent, alternative arrangements have been agreed to with the parents/guardians/caregivers.
- A record is kept of all medication administered.
- All precautions for the safety, storage and administering of medication have been taken.
- All precautions have been taken for the disposal of medical waste.



