



CENTRAL DAUPHIN SCHOOL DISTRICT

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EPHINEPHRINE DELIVERY SYSTEM - Student Self-Administration Skills Checklist

*Contact your school RN for the performance check and form completion.

Student Name _____ Date _____

School Nurse _____

Skill	Performs skill in accordance to written guidelines	Requires further instruction and supervision
	Date	Date
1. Identify causes, symptoms and prevention of anaphylaxis (including their own).		
2. Identify when to give epinephrine and consequences of delaying treatment.		
3. Notifies teacher/adult to call 911.		
4. Identifies and verifies medication and dose.		
5. Remove from storage unit and activate by removing the safety cap.		
6. Hold the Epinephrine Delivery System designated tip at a 90-degree angle against the fleshy portion of the outer thigh. Device may be given through clothing.		
7. Press the Epinephrine Delivery System hard into the thigh until it clicks and hold in place for 5-10 seconds to stimulate diffusion of the medication.		
8. Remove the Epinephrine Delivery System from the thigh position and return to the storage unit to transport with student to the hospital.		
9. State reasons for safety when carrying an "Epi-Pen" <ul style="list-style-type: none"> • Other students may not touch it • No sharing of the "Epi-Pen" • Name of student and medication must be on the device • Must be carried on student (do not leave lying around) • Student is responsible for bringing medicine to school daily • Notify the nurse immediately if "Epi-Pen" is used 		

I understand that I will lose my privilege to carry my Ephinephrine if I break any of the above rules and procedures.

Student Signature _____ Date _____

School Nurse Signature _____ Date _____

Annual Review Dates: _____