District 115
YORKVILLE
Community Unit School District
Administrative Center · 800 Game Farm Road · Yorkville, Illinois 60560 · 630-553-4382 · y115.org

SCHOOL SELF-MEDICATION AUTHORIZATION FORM FOR EPINEPHRINE AUTO-INJECTORS

To be completed by the child's parent(s)/guardian(s) physician, physician's assistant or advanced practice RN. A new form must be completed every school year. Keep in the school nurse's office.

Section 22-30 of the School Code permits a student's self-administration of an epinephrine auto-injector upon the authorization of the student's physician, physician assistant, or advanced practice registered nurse. Additionally, Section 22-30 allows a school district to both maintain a supply of epinephrine auto-injectors in a secure location and allows the school nurse or any personnel authorized under a student's Individual Health Care Action Plan, Illinois Food Allergy Emergency Action Plan and Treatment Authorization Form, or Section 504 plan, to administer an epinephrine auto-injector that matches the prescription on file to any student. The school nurse may also provide epinephrine auto-injectors that match the prescription on file to any student or authorized personnel, or administer an epinephrine auto-injector to any student who is believed to be having an anaphylactic reaction.

Self-administration means the student's discretionary ability to use and carry his or her medication. In the case of an epinephrine auto-injector, the following information from the student's physician, physician assistant, or advanced practice registered nurse: the name and purpose of the epinephrine auto-injector, the prescription dosage and the time or times at which or the special circumstances under which the epinephrine auto-injector is to be administered.

This form must be signed by the prescribing physici an, PA or APN.

Student's Name: _____ Birth Date: _____

Address: _____

Home Phone: _____ Emergency Phone: _____

School: _____ Grade: _____ Teacher: _____

To be completed by the student's physician, physician assistant, or advanced practice RN for Epi-Pens

Physician's Printed Name: _____

Office Address: _____

Office Phone: _____ Emergency Phone: _____

Medication Name: _____

Purpose: _____

Dosage: _____ Frequency: _____

The undersigned physician, physician assistant, or advanced practice registered nurse, authorize and request the School District and its employees and agents, to allow the above named student to possess and use his or her epinephrine auto-injector: (1) while in school, (2) while at a school-sponsored activity, (3) while under the supervision of school personnel, or (4) before or after normal school activities, such as while in before-school or after-school care on school-operated property. The above named student understands the need for such medication and has been instructed in its use.

Illinois law requires the School District to inform parent(s)/guardian(s) that it, and its employees and agents, including a physician providing a standing protocol or prescription for school epinephrine auto-injectors, are to incur no liability, except for willful and wanton conduct, as a result of any injury arising from a student's self-administration of medication or use of an epinephrine auto-injector regardless of whether authorization was given by the parent, guardian, or by the student's physician, physician assistant, or advance practice registered nurse. Additionally, Illinois law requires that the parent(s)/guardian(s) agree to indemnify the School District, and its employees and agents, against any claims, except a claim based on willful and wanton conduct, arising out of the self-administration of medication or use of an epinephrine auto-injector, regardless of whether authorization was given by the parent, guardian, or by the student's physician, physician assistant, or advance practice registered nurse [105 ILCS 5/22-30(c)].

If you agree, please sign here:

_____ _____ _____ _____

Student Date Parent/guardian Date

Print name and title:

_____ _____

Physician, Physician assistant or advanced practice Date