



Allergy/Asthma Emergency Medication Parent Authorization

Student Name: _____ Grade: _____ Birth Date: _____ Gender (circle): M / F

Authorization for:

- ☐ School year + summer camp
☐ Other dates:

Check only one box:

- ☐ I request that the authorized persons **at school assist my child** in taking their allergy/asthma medication.
- ☐ **GRADES 7 – 12 ONLY:** I request that my child be permitted to **self-carry and/or self-administer their allergy/asthma medication**. My child and I understand the responsibility of self-carrying medication at school. I agree to hold harmless and indemnify The Bear Creek School, its officers, employees, and agents against all claims, judgments, or liabilities arising out of my child's self-administration or carrying of this medication.
- ☐ **I am a student at least 18 years old** and sign this form on my own behalf (RCW 26.28.015 or RCW 70.02.130). I agree to hold harmless and indemnify The Bear Creek School, its officers, employees, and agents against all claims, judgments, or liabilities arising out of my self-administration or carrying of this medication.

My signature indicates my permission for the exchange of information between the school nurse and health care provider and my understanding that The Bear Creek School and school staff will not incur any liability for any injury when the medication is administered in accordance with the health care provider's direction and Washington law.

Date

Parent/Guardian/Eligible Student Signature

Name (Printed)

Instructions for parents whose students require emergency medication at school for allergies or asthma.

It is vital that students with life-threatening health conditions have both their completed paperwork uploaded to Magnus and medications on hand in the health room by the first day of school.

- 1) Upload both the care plan AND this Allergy/Asthma Medication Authorization form.
- 2) The care plan **must** be signed by a licensed health care professional.
- 3) The Allergy/Asthma Medication Authorization form must be filled out and signed by the parent.
- 4) Emergency medications:
 - TWO epinephrine pens OR TWO inhalers must be provided to the school. One for the health room that also accompanies students on their field trips and one for the emergency classroom bag OR student's backpack (grades 7-12 ONLY). This is to ensure that there is easy access to your student's emergency rescue medication.
 - Exception for inhalers: if the inhaler is only needed in conjunction with an anaphylactic reaction, then one device on campus is sufficient. It will be stored in the health room and accompany the student on field trips.
 - **Expiration dates** should not expire during the school year.
- 5) Epinephrine pens and inhalers should be labeled and dropped off at the front desk before the first day of school.
- 6) Adults who administer medication include school nurses and any employee trained and supervised by a school nurse in proper procedures for administration of medication according to the student's emergency care plan.
- 7) Medication that is not picked up within the first two weeks of summer break will be discarded. The exception is if your student needs this medication at school for summer camp.