

# EPINEPHRINE AUTHORIZATION

PLEASE READ INFORMATION AND PROCEDURES ON REVERSE SIDE

## PART I PARENT OR GUARDIAN TO COMPLETE

I hereby authorize Fairfax County Public Schools (FCPS), Fairfax County Health Department (FCHD), and School Age Child Care (SACC) personnel to administer epinephrine injection(s) as directed by the licensed prescriber (Part II). I agree to release, indemnify, and hold harmless FCPS, FCHD, and SACC and any of their officers, staff members, or agents from lawsuits, claims, expenses, demands, or actions, etc., against them for administering the injection, provided they follow the licensed prescriber's order (Part II.) I am aware that epinephrine may be administered by trained, unlicensed non-health staff, and I consent to this. I am also aware that unlicensed non-health staff cannot observe for the development of symptoms and are not allowed to wait for the appearance of symptoms before administering epinephrine for students with an authorized licensed prescriber's order. **I understand that the emergency medical services (EMS) will be called when epinephrine is administered, whether or not the student manifests any symptoms of anaphylaxis. I have read the procedures outlined on the back of this form and assume responsibility as required.**

Student Name (Last, First, Middle) \_\_\_\_\_

Date of Birth	School Name	School Year	Grade
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No School Board employee, public health nurse, or school health aide shall administer medication or treatment, as an exception under School Board policy, unless all the required clearances have been personally reviewed by the principal or his or her designee. I give permission to contact the below named licensed prescriber to clarify information provided on the order should the need arise.

Parent or Guardian Signature \_\_\_\_\_ Daytime Telephone \_\_\_\_\_ Date \_\_\_\_\_

## PART II LICENSED PRESCRIBER TO COMPLETE

Epinephrine is usually administered in FCPS or SACC by unlicensed non-health staff. These persons are trained by the school public health nurse to administer the injection. It should be noted that these staff members are not trained observers. Unlicensed non-health staff cannot observe for the development of symptoms and are not allowed to wait for the appearance of symptoms before administering epinephrine for students with an authorized licensed prescriber's order.

The epinephrine will be given immediately after report of exposure to \_\_\_\_\_  
Indicate specific allergen(s) or unknown

Route of Exposure:  Ingestion  Skin Contact  Inhalation  Insect Sting or Bite

**OR**

The following symptoms

- |   |  |
|---|--|
| <input type="checkbox"/> Sudden difficulty breathing or wheezing  | <input type="checkbox"/> Tingling sensation, itching, or metallic taste in mouth |
| <input type="checkbox"/> Hives on face and neck   | <input type="checkbox"/> Feeling of apprehension, agitation                      |
| <input type="checkbox"/> Swelling of the throat, lips, tongue, tightness/change of voice, difficulty swallowing | <input type="checkbox"/> Vomiting PLUS one of the above symptoms                 |
| <input type="checkbox"/> Other _____  |  |

**Check the appropriate box:**

- Give the premeasured dose of 0.3mg epinephrine 1:1000 aqueous solution (0.3cc) by injection.  
 Repeat dose in  5 minutes  10 minutes  15 minutes if EMS has not arrived. (Two premeasured doses will be needed in school.)
- Give the premeasured dose of 0.15mg epinephrine 1:2000 aqueous solution (0.3cc) by injection.  
 Repeat dose in  5 minutes  10 minutes  15 minutes if EMS has not arrived. (Two premeasured doses will be needed in school.)
- Give epinephrine **First**, followed by antihistamine as authorized on Medication Authorization Form (SS/SE-63).

**Check ONE appropriate box:**

- The student is to carry epinephrine during school hours with the principal's knowledge and CAN use the epinephrine injector/syringe properly in an emergency. One additional dose, to be used as backup, should be kept in health room or other approved school location.
- The student is to carry epinephrine during school hours with the principal's knowledge but CANNOT use the epinephrine injector/syringe properly in an emergency. One additional dose, to be used as backup, should be kept in health room or other approved school location.
- The epinephrine will be kept in the school health room.

**Effective date:**  Current School Year **OR**  From \_\_\_\_\_ To \_\_\_\_\_

Licensed Prescriber Name (Print or Type) \_\_\_\_\_ Licensed Prescriber Signature \_\_\_\_\_ Telephone or Fax \_\_\_\_\_ Date \_\_\_\_\_

Parent or Guardian Name (Print or Type) \_\_\_\_\_ Parent or Guardian Signature \_\_\_\_\_ Telephone \_\_\_\_\_ Date \_\_\_\_\_  
(Required if student carries epinephrine)

Student Signature \_\_\_\_\_  
(Required if student carries epinephrine)

## PART III PRINCIPAL OR PRINCIPAL DESIGNEE TO COMPLETE

**Check  as appropriate:**

- Parts I & II above are complete including signatures. (It's acceptable if all items in Part II are written on the licensed prescriber's stationery or a prescription pad.)
- Medication is appropriately labeled. \_\_\_\_\_ Date by which any unused medication is to be PICKED UP by the parent or guardian. (Within one week after expiration of this authorization or on the last day of school.)

Principal or Principal Designee Signature \_\_\_\_\_ Date \_\_\_\_\_

Information from the Fairfax County Public Schools student scholastic record is released on the condition that the recipient agrees not to permit any other party to have access to such information without the written consent of the parent, guardian, or eligible student.

## **PARENT/GUARDIAN INFORMATION ABOUT EPINEPHRINE PROCEDURES**

1. Epinephrine may be given in school, during school-sponsored activities, or at SACC only with both licensed prescriber and parent or guardian-signed authorization.
2. The parent or guardian is responsible for obtaining the licensed prescriber's order in Part II.
3. A licensed prescriber may use office stationery or a prescription pad in lieu of completing Part II. Include the following information written in lay language with no abbreviations:
  - Name of student
  - Date of birth
  - Specific allergen(s) for which epinephrine is being prescribed
  - Route of exposure (e.g., ingestion, skin contact, inhalation, or insect sting or bite)
  - Name of medication
  - Amount of premeasured epinephrine
  - Time for repeated dose if deemed necessary
  - Sequence box must be checked if antihistamine is ordered to follow epinephrine injection
  - Statement that the student may self-carry, if applicable
  - Duration or effective dates of medication order
  - Licensed prescriber signature and date
4. Epinephrine for students with authorized licensed prescriber's orders may be administered in FCPS or SACC by trained, unlicensed non-health staff who cannot observe for the development of symptoms and are not allowed to wait for the appearance of symptoms before administering the epinephrine. Only premeasured doses of epinephrine may be given by FCPS, FCHD, and SACC staff members.
5. The parent or guardian is responsible for submitting a new form to the school or SACC at the start of the school year and each time there is a change in the conditions under which epinephrine is to be injected.
6. Epinephrine must be hand-delivered to the school health room by the parent or guardian unless approved for the student to carry during school and SACC hours.
7. Medication kept in the school will be stored in a locked area accessible only to authorized personnel unless approved the student to carry it during school hours. If a student carries his or her own epinephrine, a back-up should be kept in the school health room.
8. Medication must be properly labeled by a pharmacist. If licensed prescriber's order includes a repeat of the epinephrine injection, then the parent or guardian must supply the school with two epinephrine injectors/syringes. Expiration date must be clearly indicated on the pharmacy label or injector/syringe. The parent or guardian must provide replacement epinephrine when notified that the current injector/syringe has expired or has been administered.
9. Within one week after expiration of this authorization or on the last day of school, the parent or guardian must pick up any unused portion of the medication(s) unless the student has been authorized to carry them. Medications not claimed within that period will be destroyed.
10. Unless the student has been authorized to carry epinephrine, the parent or guardian is to pick up any unused epinephrine within one week after expiration of this authorization or on the last day of school. Epinephrine not claimed within that period shall be destroyed.
11. The parent or guardian must provide a supply of medication to FCPS and SACC for medication to be administered during the school day and in SACC.