

ASTHMA OR ANAPHYLAXIS MEDICATION AUTHORIZATION

STUDENT'S NAME: _____ DOB: ___/___/___ SCHOOL YEAR: 20___ - 20___

An amendment regarding the self-administration of asthma or anaphylaxis medication became effective in the Commonwealth of Kentucky as of April 21, 2004. KRS 158.834, as amended, states:

(1) "The board of each local public school district and the governing body of each private and parochial school or school district shall permit the self-administration of medications by a student with asthma or by a student who is at risk of having anaphylaxis if the student's parent or guardian:

(a) Provides written authorization for self-administration to the school; and

(b) Provides a written statement from the student's health care practitioner that the student has asthma or is at risk of having anaphylaxis and has been instructed in self-administration of the student's prescribed medications to treat asthma or anaphylaxis. The statement shall also contain the following information:

1. The name and purpose of the medications;
2. The prescribed dosage;
3. The time or times the medications are to be regularly administered and under what additional special circumstances the medications are to be administered; and
4. The length of time for which the medications are prescribed.

(2) The statements required in subsection (1) of this section shall be kept on file in the office of the school nurse or school administrator.

(3) The school district or the governing body of each private and parochial school or school district shall inform the parent or guardian of the student that the school and its employees and agents shall incur no liability as a result of any injury sustained by the student from the self-administration of his or her medications to treat asthma or anaphylaxis. The parent or guardian of the student shall sign a statement acknowledging that the school shall incur no liability and the parent or guardian shall indemnify and hold harmless the school and its employees against any claims relating to the self-administration of medications used to treat asthma or anaphylaxis. Nothing in this subsection shall be construed to relieve liability of the school or its employees for negligence.

(4) The permission for self-administration of medications shall be effective for the school year in which it is granted and shall be renewed each following school year upon fulfilling the requirements of subsections (1) to (3) of this section."

PHYSICIAN'S ORDER

I have examined this student for (diagnosis): _____

Name of Medication: _____ Dosage & Route: _____

Circumstances under which medication may be self-administered: _____

Length of time for which medication is prescribed: _____

Physician's Signature: _____ Date: ___/___/___

Printed Name: _____ Phone: _____

PARENT/GUARDIAN AUTHORIZATION

In recognition of, and compliance with, the above-quoted statute KRS 158.834, I:

1. Give this written authorization to Sayre School for self-administration of medications per paragraph (1) above.
2. Have **included written documentation from said student's health care practitioner** that complies with the terms and requirements of paragraph (1)(b) above **and includes all of the information required by sub-parts 1 through 4** of sub-paragraph (1)(b).
3. Acknowledge by this authorization/signed statement, in accordance with paragraph (3) above, that I have been informed that Sayre School and its employees and agents shall incur no liability as a result of any injury sustained by my child/student from the self-administration of his or her medications to treat asthma or anaphylaxis and I will indemnify and hold harmless Sayre School and its employees against any claims relating to the self-administration of medications used to treat asthma or anaphylaxis, provided that this shall not be construed to relieve liability of said school or its employees for negligence.

Parent/Guardian Signature: _____ Date: _____

Please print and sign this form, including written documentation from student's health care practitioner. Both must be on file in the Divisional Office.