Roosevelt Public School
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PARENT/GURADIAN PERMISSION FOR THE TRAINING OF A SCHOOL APPOINTED DELEGATE FOR THE ADMINISTRATION OF AN EPINEHRINE AUTO-INJECTOR IN AN EMERGENCY

New Jersey State law N.J.S.A. 18A:40-12.6 states that upon written request the school nurse shall recruit and train volunteers who may administer an epinephrine auto-injector in the event of an emergency when the school nurse is not present.

Please note: This statute only authorizes the delegation of epinephrine. While some physician's write an order for an antihistamine to be administered, it may not be given by a delegate. An antihistamine may only be administered by a school nurse.

If you would like a trained, volunteer delegate to be assigned to your child, please complete the following form. Both a parent's and physician's signature are required.

Student's Name_____ D.O.B._____

Allergy to _____

Does the student have a "documented episode of anaphylaxis?" _____

If yes, please give date and symptoms that episode occurred:_____

AUTHORIZATON FOR DELEGATION AND RELEASE AND INDEMNIFICATION

In the event that the above named student has an anaphylactic reaction and the school nurse is unavailable, the epinephrine auto-injector will be administered by the school delegate pursuant to statute. The school delegate is NOT permitted to give any prescribed antihistamine prior to administering the epinephrine auto-injector. I request that my child be given the prescribed epinephrine via auto-injector at school or a school sponsored activity by the school nurse or delegate. If my child is authorized to self-administer, I as his/her parent, will be aware of the expiration date and renew the injector when needed. I relieve the Roosevelt Board of Education and its employees of any liability that may result from the administration of the above medication to my child, or from self-administration when certified by the physician.

Parent/Guardian Signature_____Date_____

Physician Signature_____Date_____Physician Stamp: