



ANDREAN HIGH SCHOOL

CHRIST IS MY TEACHER

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Asthma Inhalers to be Carried at School

Please complete this form and return it to school if your child needs to use/carry an asthma inhaler at school.

Option #1 The student comes to the nurse's office where the inhaler is kept and uses it under supervision. **All medication must be brought to the school in its original container, with a signed doctor and parent note giving the student's name, dose and time for the medication to be given.**

Option #2 Qualified students will be allowed to carry their own inhalers. **A doctor and parent note must be on file in the nurse's office allowing for self-medication. It is imperative that the student properly secure their inhaler on their person.**

Contract between Student, Parent, Doctor and Nurse for permission to carry medication at school.

- The student has demonstrated to the nurse or doctor the correct use of the inhaler
- The student agrees to never share the inhaler with another person
- The student agrees to carry the inhaler on their person
- The student agrees that after 2 puffs, if there is not marked improvement, he/she will go to the nurse immediately.

Student signature _____ Date _____

I give permission for _____ to carry their inhaler as prescribed by his/her doctor as listed below. I understand that he/she must follow the rules listed above. **I will notify the schools of changes in medication or my child's medical condition.**

Parent Signature _____ Date _____

Name of Medication

Dose

Frequency of Use

Physician Signature _____ Date _____