

June 13, 2011

Dear Parent/Guardian;

You have informed Trinity Academy that your child has a serious allergy/medical condition that may require the nurse to administer emergency medication. The attached forms need to be updated *each* year. For your convenience a space has been provided for you to check off all **required items that need to be submitted to the school nurse by the first day of school**:

- \_\_\_\_\_ 1. **Authorization for Exchange of Confidential Information Form** (*see back of this form*)
- \_\_\_\_\_ 2. **Medication Authorization Form(s)** for *each* medication
- \_\_\_\_\_ 3. **Self Administration Form** needs to be signed *only* if the physician determines your child is capable to carry and administer their own medication *at school/class trip*. This includes only Epi Pen/Twinject, asthma medication, or insulin.
- \_\_\_\_\_ 4. **Emergency Health Care Plan**
- \_\_\_\_\_ 5. **Allergy & Symptom Worksheet**
- \_\_\_\_\_ 6. **Asthma Action Plan**
- \_\_\_\_\_ 7. **All Medication(s)** must be in the original prescription container and labeled with your child's name. *Do not send the incorrect dosage or expired medication.*
- \_\_\_\_\_ 8. **Two photographs** of your child

All medication(s) and attached forms are required to be provided by the first day of school. We *will not* accept medications unless they are accompanied by **ALL** of the above paperwork. **In case of an emergency, we will call 911 if we do not have your child's medication(s) and the requested authorization from your child's physician.** Thank you for your full cooperation.

Sincerely,

Annamae Curran RN  
Maria Rodgers RN

\*\*It is the parent's responsibility to provide a safe alternative snack for their child in the case of any bake sales, birthday celebrations etc. during the school year. A refrigerator/freezer is located in the nurse's office that can be used to store treats for your child.

