

OFFICE OF CATHOLIC SCHOOLS DIOCESE OF ARLINGTON
Parent/Student Agreement for Permission to Carry an Inhaler

(Physician must also sign that student should carry an inhaler at school on the Asthma Action Plan)

Parent:

- I give my consent for my child to carry and self-administer his/her inhaler.
- I understand that the school or its employees cannot be held responsible for negative outcomes resulting from self-administration of the inhaled asthma medication.
- This permission to possess and self-administer asthma medication may be revoked by the principal if it is determined that your child is not safely and effectively self-administering the medication.
- A new Asthma Action Plan signed by the physician and Parent/Student Agreement for Permission to Carry an Inhaler must be submitted each school year.
- A 2nd, back-up inhaler, is advised to be kept in the clinic, in the event the student forgets or does not have their inhaler. If 2nd inhaler is not supplied and kept in clinic, complete Appendix F-25.

Parent/Guardian's Signature Required

Date

Student:

- I have demonstrated the correct use of the inhaler to the school nurse.
- I agree never to share my inhaler with another person or use it in an unsafe manner.
- I agree that if there is no improvement after self-administering the medication, I will report to the school nurse or another appropriate adult if the school nurse is not available or present.

Student's Signature Required

Date