

For Severe Allergies (requiring Epi-pen auto injector +/-or Benadryl), the following is required every school year on the first day of school:

(Number of pages including this cover sheet is 5)

- 1. Emergency Health Care Plan (Epi 3)- (Parent and physician signature required)**
- 2. Permission for delegating epi-pen administration (epi-1) – (Physician completes and signs)**
- 3. Permission for delegating epi-pen administration (epi-2)- (Parent completes and signs)**
- 4. Send in Epi-pen auto injector in current pharmacy box with label**
- 5. If Benadryl ordered must be ordered by a physician and signed by parent (must be filled in on Epi 3 Form)**
- 6. You must also send in the Benadryl in its original container. Please note that Benadryl may not be given by a delegate. The delegate is only trained for the epi-pen.**
- 7. Self medication form if applicable (parent and physician complete)**