Epinephrine Pen: Student Self-Administration Skills Checklist

- Contact your school nurse for the skills check and form completion.

Student Name: _____ Date: _____

School Nurse: _____

Skill	Performs skill in accordance with written guideline	Requires further instruction & supervision
	Date/Initials	Date/Initials
1. Identify causes, symptoms, and prevention of anaphylaxis (including their own)		
2. Identify when to give epinephrine and consequences of delaying treatment.		
3. Notifies teacher/adult to call 911.		
4. Identifies and verifies medication and dose.		
5. Remove from storage unit and activate by removing the safety cap.		
6. Hold the Epinephrine Delivery System designated tip at a 90-degree angle against the fleshy portion of the outer thigh. Device may be given through clothing.		
7. Press the Epinephrine Delivery System hard into the thigh until it clicks and hold in place for 5-10 seconds to stimulate diffusion of the medication.		
8. Remove the Epinephrine Delivery System from the thigh position and return to the storage unit to transport with student to the hospital. Note time given.		
9. State reasons for safety when carrying an "Epi-pen" • Other students may not touch the epi-pen • No sharing, giving or selling of the epi-pen • Name of student must be on the device. • Must be carried on the student (not left lying out) • Student is responsible for bringing medication to school daily. • Notify the nurse immediately if epi pen is used		

I understand that I will lose my privilege to carry my Epinephrine if I break any of the above rules and procedures.

Student Signature: _____ Date: _____

School Nurse Signature: _____ Date: _____

Annual Review Dates: _____ _____ _____ _____ _____ _____