

# EpiPen TRAINING CONFIRMATION

## **ATTENTION SUBSTITUTE TEACHERS GRADES TK - 8:**

**PLEASE** read this information **BEFORE** the students enter the room.

***If this is your first time in this classroom, see the School Nurse or appropriate personnel for training in implementing the emergency response in the Individual Health Care Plan and how to administer an Epi-Pen injector.***

Once you have or if you previously received EpiPen training this school year, please initial and date below. **You must receive training on an annual basis.**

\_\_\_\_\_  
Substitute Initials

\_\_\_\_\_  
Date

If you use the Epi-Pen or emergency medication, call the front office by pushing the “urgent” button on the wall phone for assistance. If no one answers, dial “911” from the phone—no need to dial “9” first. Send a student to the front office immediately stating you have an emergency in your classroom.

Attachments:  
Individual Health Care Plan  
504 Plan