

ADMINISTRATION OF ASTHMA INHALERS IN SCHOOLS

If your child has an Asthma plan as directed by their GP please complete the form below.

If your child requires Asthma medication on an ad-hoc basis could please report this to the office first thing in the morning on the day your child needs to take their medication.

Name of Pupil

Address

.....

Medical condition of pupil

Name of prescribing doctor

Medicine

Dose Frequency of dose

I give permission for my son/daughter to have their asthma inhaler available in class and manage its use.

Signed Date

(Parent/carer)



Ilisham C of E Academy
Ilisham Road, Torquay,
Devon, TQ1 2JQ
T: 01803 292313 E: iisham@lapsw.org



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NOTES FOR GUIDANCE

This form should be completed by the parent or guardian of the pupil and be delivered personally, together with the medicine, to the Head of Academy or their nominee.

The medicine should be in date and clearly labelled with:

- its contents
- the owner's name
- dosage
- the prescribing doctor's name.

The information given overleaf is requested, in confidence, to ensure that the Head of Academy is fully aware of the medical needs of your child.

While no staff member can be compelled to give medical treatment to a pupil, it is hoped that the support given through parental consent, the support of the Council through these guidelines, and the help of the School Medical Service will encourage them to see this as part of the pastoral role. Where such arrangements fail it is the parents' responsibility to make appropriate alternative arrangements.