

GUIDELINES FOR CHILDREN WITH ANAPHYLAXIS

In recent years in our Religious Education Programs we have noted a rising number of children with severe allergic reactions. We know that every parent's first concern is the well being of their child, and while we yearn to serve every child, certain situations are beyond our capacity to handle as a volunteer program.

Policy

In order to ensure the health and safety of any child participating in a Parish catechetical program (the "Program") who is subject to severe allergic reactions, it is the policy of the Office for Pastoral Services of the Diocese of Bridgeport that a parent or guardian or a person designated by the Parent, must be present in class with the child for the duration of each class attended by the child, for the purpose of administering an epinephrine auto-injector in the event of an anaphylactic reaction.

The only exceptions to this policy are where the child is authorized to self-administer his or her own medication; or if the DRE or catechist present during class time is a registered nurse and therefore can be the designee.

Procedure

Parent/Guardian must complete all appropriate forms:

- A. Where a Parent authorizes a designee to administer medication to a child, the Parent must provide the following completed form:
 - a. *Permission to Dispense Medication and Waiver and Release of All Claims* (to be signed by physician, and co-signed by designee)

- B. Where a child is authorized to self-administer medication as described below, the Parent must provide the following completed form:
 - a. *Self-Administration Form and Waiver and Release of All Claims* (to be co-signed by primary health care provider)

In the event that there is no parent or designee, home schooled options should be made available.

Authorization for Administration by Designee

If a DRE or catechist present during class time is a registered nurse, a parent or guardian may request that such DRE or catechist be authorized as the designee of the parent or guardian to administer the epi-pen to the child. The parent or guardian must supply such designee at the beginning of each class with the prescribed epi-pen in the original container dispensed and properly labeled by a physician or pharmacist.

Authorization of Parent or Legal Guardian

I hereby request that the above epi-pen be administered by the designee identified below. I understand that I must supply the designee at the beginning of each class with the prescribed epi-pen in the original container dispensed and properly labeled by a physician or pharmacist.

Parent/Guardian Signature: _____ Date: _____

Consent of Designee

Designee Name: _____

Designee Signature: _____ Date: _____

Authorization of Physician

Physician's Signature: _____ Date: _____

Waiver and Release of All Claims

I recognize and acknowledge that there are certain risks associated with the administration of medication to my minor child. Such risks include, but are not limited to, failing to properly administer the medication, failing to observe side effects, failing to assess and/or recognize an adverse reaction, failing to assess and/or recognize a medical emergency, and failing to recognize the need to summon emergency medical services.

I agree to release, indemnify and hold harmless said designee and the Diocese of Bridgeport, its parishes and affiliates, and their respective members, directors, officers, agents, volunteers and employees from any and all claims for injuries, damages and losses I or my minor child may have (or which may accrue to me or my minor child) and arising out of, connected with, incidental to, or in any way associated with the administration of such medication.

Parent/Guardian Signature: _____ Date: _____