

MARLBORO TOWNSHIP BOARD OF EDUCATION
1980 TOWNSHIP DRIVE
MARLBORO, NEW JERSEY 07746-2298

**EPI-PEN ADMINISTRATION BY DESIGNEE
WAIVER OF LIABILITY**

Please be advised that the Marlboro Township Board of Education has adopted a policy governing the emergency administration of epinephrine via a single dose auto-injector mechanism containing epinephrine to a pupil for anaphylaxis. The administration of epinephrine may be performed by the school nurse or by a person designated by the school nurse in consultation with the Board of Education, in the absence of the school nurse. The policy and regulations set forth specific conditions under which administration of a single dose auto-injector mechanism containing epinephrine may be permitted by a designee for anaphylactic reaction. These conditions are as follows:

- A licensed physician must provide written authorization for the administration of a pre-filled, single dose auto-injector mechanism containing epinephrine.
- The physician must also certify that the pupil requires the administration of epinephrine for anaphylaxis.
- A current pre-filled, single dose auto-injector mechanism containing epinephrine, as provided by the parent, must be retained in the Nurse's office.
- If the procedures specified in the policy and regulations are followed the district shall have no liability as a result of any injury arising from the administration. You must sign the Waiver of Liability below to acknowledge that you have been informed and understand this condition.

WAIVER OF LIABILITY

I/We, parents/guardians of _____, in our personal capacities and as the parents/guardians of said child request that the Marlboro School District permit the school nurse, or in the absence of the nurse, a designee, to administer epinephrine via a single dose auto-injector mechanism containing epinephrine in emergency situations to our child while on school property or off school property at an approved school event. I/We agree to comply with the regulations of the school district and in consideration of the privilege extended to us and our child, we agree to release, indemnify and hold harmless the Board of Education of the Marlboro Township School District and its officers, employees and servants from and against any and all losses, claims, damages, or expenses arising from or growing out of the acceptance by the Board of the request recited above. I/We acknowledge that if the procedures specified in the Board Policy regarding emergency administration of epinephrine are followed, the board, its officers, employees and servants shall have no liability as a result of any injury arising from the administration of epinephrine to our child.

I/We also agree to provide the school nurse a current pre-filled, single dose auto-injector mechanism containing epinephrine in accordance with school policy.

I/We agree to a designee. I/We do not agree to a designee.

Parent's Signature _____ Date _____

****PERMISSION MUST BE RENEWED EACH YEAR.****

THIS DOCUMENT MUST BE EXECUTED NO EARLIER THAN JULY 1, OF THE INCOMING SCHOOL YEAR.