**Prescription for School Supplied Stock Epinephrine Auto-Injectors for School Use**

**Pursuant to RCW 28A.210.383**

LICENSED HEALTHCARE PROVIDER: Click or tap here to enter text. DATE:Click or tap to enter a date.

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|  |
| NAME |
|  |
| STREET ADDRESS |
|  |
| CITY, ZIP CODE |
|  |
| PHONE NUMBER |
|  |
| DEA NUMBER |

ISSUED TO:

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| --- |
|  |
| NAME OF SCHOOL DISTRICT OR SCHOOL  |
|  |
| NAME OF SITRICT OR SCHOOL REPTRESENTATIVE |
|  |
| STREET ADDRESS |
|  |
| CITY, ZIP CODE |

|  |  |
| --- | --- |
| #Number | Dosage |
|  | 0.15 mg (<66 lbs.) Epinephrine Auto-Injector(s) |
|  | 0.30 mg (>66 lbs.) Epinephrine Auto-Injector(s) |

**INSTRUCTIONS:**

To be administered, as needed, to a student exhibiting symptoms of anaphylaxis in accordance with the “Standing Order for the Administration of School Supplied Stock Epinephrine Auto-Injectors for Potentially Life-Threatening Allergic Reactions (Anaphylaxis) in Individuals Pursuant to RCW 28A.210.383.”

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| Substitution Permitted |  | Dispense as Written |