STOCK INHALER FOR SCHOOLS PROGRAM

TRAINING FOR SCHOOL STAFF FORM | 2017-2018 SCHOOL YEAR

THE FOLLOWING INDIVIDUALS WILL BE RESPONSIBLE FOR ADMINSTRATION OF STOCK ALBUTEROL MEDICATION (A MINIMUM OF 2 INDIVIDUALS IS REQUIRED):

TRAINED STAFF MEMBER 1			
Trained Staff Member Last Name:		Trained Staff Member First Name:	
Title:			
Email Address:			
Phone Number:	( )		

TRAINED STAFF MEMBER 2			
Trained Staff Member Last Name:		Trained Staff Member First Name:	
Title:			
Email Address:			
Phone Number:	( )		

TRAINED STAFF MEMBER 3			
Trained Staff Member Last Name:		Trained Staff Member First Name:	
Title:			
Email Address:			
Phone Number:	( )		

Complete this form and keep with other program documentation.

CHECKLIST FOR PROGRAM PARTICIPATION

Please complete the following checklist to ensure all requirements for program participation have been met. Check each step that has been completed and file documentation in a safe location.

- ☐ Obtained approval to implement program from school district.
- ☐ Determined school or school district's medical director.
- ☐ Enrolled school in program on AAC website.
- ☐ Designated a minimum of 2 individuals as school's trained staff members to administer albuterol and completed training.
- ☐ Attached 2 copies of trained staff members' stock inhaler training certificates.
- ☐ Downloaded copy of the Stock Inhalers for Schools protocol and other forms and documentation.
- ☐ Obtained prescriptions for albuterol inhaler and Thayer LiteAire® spacers and filled prescriptions.

***We acknowledge that we have received the appropriate training, supplies, and have designated a minimum of two trained staff members to administer albuterol medication at this school.

REQUIRES A MINIMUM OF 2 TRAINED STAFF MEMBERS' SIGNATURES:

		/ /
TRAINED STAFF MEMBER 1	**SIGNATURE**	**DATE**
		/ /
TRAINED STAFF MEMBER 2	**SIGNATURE**	**DATE**

Complete this form and keep with other program documentation.