

Road's End Farm Horsemanship Camp
Authorization Form – Asthma Inhaler

In accordance with New Hampshire State Regulations (see reverse side for full regulations), Road's End Farm Horsemanship Camp requires that all campers who must possess and/or self-administer an **Asthma-Inhaler** must have a signed permission from the child's parent AND a Health Care Professional.

PARENT SECTION

Child's Name: _____ DOB: _____ Age at Camp: _____

Permission is granted to Road's End Farm Horsemanship Camp to allow my child to possess and use an **Asthma Inhaler**.

Parent/Guardian Signature: _____ Date: _____

Print Name: _____

LICENSED MEDICAL PERSONNEL

MUST COMPLETE THIS SECTION PERTAINING TO ASTHMA INHALERS

Name of Medication: _____ Date of Medication order: _____

1. Route and dosage of medication: _____

2. Specific recommendations for administration (list symptoms that would indicate for medication):

3. Frequency and time of medication administration or assistance: _____

4. Any special side effects, contraindications and adverse reactions to be observed: _____

5. List any adverse reactions that may occur should another child, for whom the asthma inhaler is not prescribed, receive a dose medication _____

I hereby verify that _____ has a valid prescription and the knowledge and skills to safely possess and use the aforementioned asthma inhaler at Road's End Farm Horsemanship Camp:

Licensed Medical Personnel Signature: _____ Date: _____

Print Name: _____

Business Phone: _____ Emergency Phone: _____

If any of these criteria are not met, Road's End Farm Horsemanship Camp will not allow your child to carry or possess an asthma inhaler. If you or your child's Health Care Professional has any questions, please contact us at (603) 363-4900.

NH CODE OF ADMINISTRATIVE RULES

Section 485-A:25-f

RSA 485-A:25-f Possession and Use of Asthma Inhalers at Recreation Camps. – A recreation camp shall permit a child to possess and use a metered dose inhaler or a dry powder inhaler to alleviate asthmatic symptoms, or before exercise to prevent the onset of asthmatic symptoms, if the following conditions are satisfied:

I. The child has the written approval of the child's physician and the written approval of the parent or guardian. The camp shall obtain the following information from the child's physician:

- (a) The child's name.
- (b) The name and signature of the licensed prescriber and business and emergency numbers.
- (c) The name, route, and dosage of medication.
- (d) The frequency and time of medication administration or assistance.
- (e) The date of the order.
- (f) A diagnosis and any other medical conditions requiring medications, if not a violation of confidentiality or if not contrary to the request of the parent or guardian to keep confidential.
- (g) Specific recommendations for administration.
- (h) Any special side effects, contraindications, and adverse reactions to be observed.
- (i) The name of each required medication.
- (j) At least one emergency telephone number for contacting the parent or guardian.

II. The recreational camp administrator or, if a nurse is assigned to the camp, the nurse shall receive copies of the written approvals required by paragraph I.

III. The child's parent or guardian shall submit written verification from the physician confirming that the child has the knowledge and skills to safely possess and use an asthma inhaler in a camp setting.

IV. If the conditions provided in this section are satisfied, the child may possess and use the inhaler at the camp or at any camp sponsored activity, event, or program.

V. In this section, "physician" includes any physician or health practitioner with the authority to write prescriptions.

Source. 2003, 51:4, eff. Aug. 15, 2003.

RSA 485-A:25-g Immunity. – No recreational camp or camp employee shall be liable in a suit for damages as a result of any act or omission related to a child's use of an inhaler if the provisions of RSA 485-A:25-f have been met, unless the damages were caused by willful or wanton conduct or disregard of the criteria established in that section for the possession and self-administration of an asthma inhaler by a child.

Source. 2003, 51:4, eff. Aug. 15, 2003.

Please acknowledge your acceptance of the terms of this form and of the regulations above.

Parent/Guardian Signature: _____

Date: _____

Print Name: _____