

“Sample Letter to Parents/Guardians/Caregivers Authorization for the Administration of Reliever Medication Asthma Standard Health Care Plan”

(School Logo)

DATE

Dear Parent/Guardian/Caregiver:

Please complete the attached *Authorization for Administration of Reliever Medication & Asthma Standard Health Care Plan (SHCP)* form and return it to the school.

This form includes the following information.

- Authorization for the school to administer reliever medication (e.g., salbutamol, Symbicort®) to your child.
- Standard Health Care Plan for asthma based on the clinical practice guidelines developed by the Unified Referral and Intake System (URIS) Clinical practice guidelines can be found on the URIS website - [Unified Referral Intake System](#).

Please contact the school if you have questions about this form or if your child is no longer prescribed reliever medication (e.g., salbutamol, Symbicort®)

Sincerely,

Principal