



Contract for children carrying **Asthma Inhalers** with them
while at BASE Camp

NAME _____ D.O.B. _____

Child

- I plan to keep my asthma inhaler with me at BASE Camp rather than in the BASE camp locked MED Box.
- I agree to use my asthma inhaler in a responsible manner, according to my physician's orders.
- I will not allow any other person to use my asthma inhaler.
- I will notify the BASE Camp staff immediately if the treatment is not helping my asthma.

CHILD Signature _____ Date _____

Parent/Guardian Signature _____ Date _____

Nurse Coordinator

- The above child has demonstrated correct technique for asthma inhaler use and an understanding of the physician's orders.
- BASE Camp staff that have the need-to-know about the child's condition and the need to carry medication, have been notified.
- The above child, to the best of my knowledge, is capable of self-administering the asthma inhaler per the Health Care Action Plan.

Nurse Coordinator Signature _____ Date _____

- I do not feel like the above child is capable of self-administration and the parent has been notified.

Nurse Coordinator Signature _____ Date _____