

Medication Administration Quiz
Sheboygan Area School District
Epi-Pens

Name _____
School _____

True or False:

1. An Epi-pen is only used for students allergic to bees. True or False
2. 911 must always be called if an Epi-pen is administered. True or False
3. Students are not allowed to administer their own Epi-pen. True or False

Multiple choice:

4. Signs and symptoms of an allergic reaction may be....
 - a. Itching and swelling of the lips, tongue, eyelids, mouth, hands or feet
 - b. Tightness in the throat
 - c. Hives, nausea, vomiting
 - d. All of the above
5. An Epi-Pen
 - a. A special type of pen used only by highly skilled secretaries
 - b. A medication that can only be administered by paramedics
 - c. A unit dose of epinephrine that can easily be given in emergency situations
 - d. An emergency medication that requires careful dosage calibration
6. Which of the following are considerations when administering an Epi-pen?
 - a. Keep your thumb on the end of the pen
 - b. Wrap all fingers (including thumb) around the pen
 - c. It can be given directly through clothing
 - d. It doesn't matter where you give it
 - e. It should be administered in the fleshy portion of the upper outer thigh
 - f. b, c, e

By signing this review, I am willing and voluntarily accept to administer oral medications to students throughout the school year. I also understand that I may contact the District School Nurse at anytime by phone if I have questions or concerns.

Staff Signature: _____

Staff Printed Name: _____

Delegating School Nurse Signature: _____

Date: _____

Return Demonstration Dates (to be completed by school nurse):

Date: / /	Nurse Initials:
Date: / /	Nurse Initials:
Date: / /	Nurse Initials:
Date: / /	Nurse Initials: