



Date:

Dear Parent/Guardian:

Your child's epinephrine auto-injector expiry date is _____.

Please replace your child's epinephrine auto-injector at your child's school **before** this expiration date.

Remember to write down the expiry date for your child's epinephrine auto-injector(s) on a calendar as we cannot guarantee a reminder for this every school year.

EpiPen and Allerject have a free email reminder service to help parents and students keep track of the expiry date.

EpiPen - www.epipen.ca

Allerject-www.allerject.ca

Sincerely,

Principal