

Eden Prairie Schools Stock EpiPen Protocol:

Background:

Anaphylaxis is a life-threatening allergic reaction. In treating anaphylaxis, epinephrine is a first line of treatment and needs to be given immediately to be most effective. Some students and adults have prescribed epinephrine auto-injectors to treat their severe allergy. Students with known severe allergies should have a health plan with the school health office; that plan should be followed.

There may be a time when an individual has a severe allergic reaction that has not been identified before. In these cases, the new state law, MN Statutes 121A.2207, allows trained school staff members to administer an epinephrine auto-injector to a student or other individual believed to be having an anaphylactic reaction, regardless of whether the student or other individual has a prescription for an epinephrine auto-injector.

Epinephrine auto-injectors have been available in schools for students with identified severe allergies who have a health plan in place; many staff members have been trained for administration of this auto-injectable epinephrine for these students. With the new law, the administration of the epinephrine is the same but the new piece is identifying anaphylaxis in someone who has not previously experienced it. According to the law, any school staff member may be trained to identify anaphylaxis and administer an epinephrine auto-injector.

Procedures:

Stock epinephrine auto-injectors will be available during the school day in each building during the teacher contracted hours. Each school in Eden Prairie will be stocked with 2 EpiPen Auto-Injector packs (each pack contains 2 pens). EpiPens come in a Junior Dose for those between 33 and 66 pounds and the regular dose for those over 66 pounds. Each elementary building will have one 2-pack of each dose (junior and regular). Central Middle School, Eden Prairie High School and TASSEL Transition Program will have only the regular dose and the Early Childhood programs will have only the junior dose.

The EpiPens will be available for individuals with unidentified allergies and experience an unexpected anaphylactic reaction during the school day. These are not intended for students who have identified severe allergies and a health plan requiring them to have an EpiPen available at all times.

The EpiPens will be kept in a bright yellow EpiLocker inside of the red alert kits in the health rooms. The health rooms are not locked during the day and the kits are accessible during the 8 hour contract day. The EpiPens will remain at school and will not be taken on Fieldtrips.

Note: Black Sharpie Markers should stay with the pens in order to write time of administration directly on the pen.



Training:

Office personnel and building administrators who are consistently in the buildings during teacher contract hours, health room paraprofessionals and other staff designated by the licensed school nurse will be trained on EpiPen administration. Training includes what signs or symptoms to look for that indicate Anaphylaxis and how to administer the EpiPen. Calling 911 and documentation according to District Policy will be standard protocol when an EpiPen is used (see quick reference guide below). Building Licensed School Nurses will be responsible for the training of building personnel.

Maintenance:

EpiPen Auto-Injectors have a life of approximately 18 months. Building Licensed School Nurses will be responsible for monitoring the expiration dates on the pens and requesting replacement pens. Pens should be examined quarterly. Replacement pens will also be requested in the event that the pens are used to treat Anaphylaxis.



Quick Reference Guide for Anaphylaxis (Severe Allergic Reaction) Note: only trained staff members may administer epinephrine.

Mouth	Itching, tingling, or swelling of lips, tongue, mouth
Skin (80-90%)	Hives/rash, reddened/flushed skin, itching, swelling of the face or extremities
Gut (30-45%)	Nausea, vomiting, abdominal cramps, diarrhea
Throat	Itching, tightness/swelling of throat, difficulty swallowing, hoarseness, frequent
	clearing of the throat
Lung (70%)	Shortness of breath, trouble breathing, tight chest, difficulty talking, repetitive
	coughing, wheezing,
Heart (10-45%)	Pale, blue or gray color skin or nails; sweaty or clammy skin. Feeling faint or dizzy,
	loss of consciousness. Weak or thready pulse.
Other (10-15%)	Feeling anxious or like something bad is happening. Confusion.

1. Recognize Symptoms of Anaphylaxis:

Look for two system involvement. Ask about symptoms they may be experiencing.

Do they have a known allergy? Do they have their own epinephrine – if so, use it if needed.

Do they have a heart condition? If so, call and consult 911.

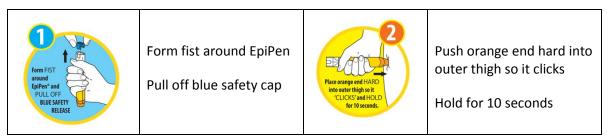
- 2. For two system involvement or difficulty breathing, give epinephrine quickly.
 - A. Determine proper dose of epinephrine auto-injector (EpiPen).

Adult dose for greater than 55 pounds: EpiPen with yellow label. Red Epi-Ready case.

Child dose for 33 - 55 pounds: EpiPen Junior with green label. Blue Epi-Ready case.

Children under 55 pounds are generally under age 8 (2-3rd grade).

B. Administer EpiPen.



- C. Write time of injection on EpiPen.
- 3. Call 911 advise that anaphylaxis is suspected and that epinephrine has been given.
- 4. Have the individual lie down, or at least sit down on floor.
- 5. Call parent/guardian/emergency contact. Make a note of this information for follow-up needs.
- 6. Stay with the individual until Emergency Medical Services (EMS) arrives. Reassure as needed. Monitor their airway and breathing. Administer CPR if needed.
- 7. If symptoms do not improve or symptoms worsen and EMS has not arrived, administer a second EpiPen 5 to 15 minutes after the initial injection. Write the time on the EpiPen.
- 8. When EMS arrives, give them the used EpiPen(s). EMS to manage transport to the emergency room.



9. Complete incident report. Inform main office of event; inform school health office if it is a student.

Note: Main office and School Nurse should be notified immediately of the incident and informed that 911 has been called.