

# MORRIS SCHOOL DISTRICT

## Allergy Emergency Action Plan

Name \_\_\_\_\_ D.O.B. \_\_\_\_\_ Gr/hmrm \_\_\_\_\_ Student's picture \_\_\_\_\_

Allergy to \_\_\_\_\_

Weight \_\_\_\_\_ lbs. Asthma  Yes (higher risk for a severe reaction)  No

\*\*\*\*PLEASE NOTE: NON-MEDICAL TRAINED DESIGNEE MAY GIVE ONLY EPINEPHRINE, NOT ANTIHISTAMINES\*\*\*\*

Extremely reactive to the following \_\_\_\_\_

**THEREFORE:**

- If checked, give epinephrine immediately for ANY symptoms if there is likely allergen ingestion/exposure.
- If checked, give epinephrine immediately if there is *definite ingestion/exposure*, even with no symptoms.

Otherwise:

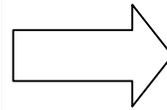
**FOR ANY SEVERE SYMPTOMS AFTER SUSPECTED OR KNOWN INGESTION/EXPOSURE:**

One or more of the following:

LUNG Short of breath, wheeze, repetitive cough  
HEART Pale, blue, faint, weak pulse, dizzy, confused  
THROAT Tight, hoarse, trouble breathing/swallowing  
MOUTH Obstructive swelling (tongue and/or lips)  
SKIN Many hives over body

Or combination of symptoms from different body areas:

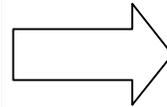
SKIN Hives, itchy rashes, swelling (e.g. eyes, lips)  
GUT Vomiting, diarrhea, crampy pain



1. INJECT EPINEPHRINE IMMEDIATELY
2. Call 911
3. Begin monitoring (see box below)
4. Give additional medications (nurse only)
  - Antihistamine
  - Inhaler (bronchodilator) if asthma

**FOR MILD SYMPTOMS ONLY:**

MOUTH Itchy mouth  
SKIN A few hives around mouth/face, mild itch  
GUT Mild nausea/discomfort



1. GIVE ANTIHISTAMINE (nurse only)
2. Stay with the student; alert parent
3. If symptoms progress (see above), USE EPINEPHRINE
4. Begin monitoring (see box below)

Medications/Doses  Student is authorized to self-administer  Student is not authorized to self-administer

Epinephrine (brand and dose) \_\_\_\_\_

Antihistamine (brand and dose) \_\_\_\_\_

Other \_\_\_\_\_

**Monitoring – Stay with the student; alert healthcare professionals and parent.** Tell rescue squad epinephrine was given; request an ambulance with epinephrine. Note time epinephrine was given. A 2<sup>nd</sup> dose can be given 5 minutes or more after the 1<sup>st</sup> if symptoms persist or recur. For a severe reaction, consider keeping student lying on back with legs raised. Treat student even if parents cannot be reached. See back/attached for auto-injection technique.

Parent/guardian signature \_\_\_\_\_

Date \_\_\_\_\_

Healthcare provider signature \_\_\_\_\_

Date \_\_\_\_\_