

## Allergy with Risk of Anaphylaxis Individualized Health Plan

EISD Rev. 3/2020

Student Name	:					_	Date of Birth:							
Annual Review	Year	Initials	Year	Initials	Year	Initials	Year	Initials	Year	Initials	Year	Initials	Year	Initials
IHP	rear	initials	rear	initials	Tear	initials	Tear	initials	rear	iniciais	rear	initials	rear	iniciais
ECP received														
Assessment Da Life-threatenin History of anap	g allergie		Symp	toms:										
§504 Evaluation Due to the nation of the pursue or determine in the future of the please.	ure of thi cline §50 ure.	04 service	es is up t	o each fa	mily. Sh	-	decide	to decline						
Optional elem	entary so	hool acc	ommoda	ations for	r studen	ts with tr	ee nut c	r peanut	allergie	<u>es</u> :				
_		t-free clas				uest 🗆		line 🗆						
Design	nated nut	t-free caf	eteria se	ating	Requ	uest 🗆	<u>Dec</u>	<u>line</u> □						
<ul> <li>Keep t</li> </ul>	crack of n le 2 addit ces: lidelines able on th	nedicatio tional epi for the Ca ne EISD w	n expiration expiration in exp	tion date e auto-inj udents w https://w	s and re jectors f ith Food www.ear	nesisd.net	nephring ntary aft s at Risk t/dept/h	e before i er-schoo for Anapl ealth/foo	t expires I program nylaxis" od-allerg	s ms (Easy and the ' ies	'EISD Foo	od Allergy		
Goals: Stude	nt will lin	nit exposi	ure to all	lergens a	nd reco	gnize sym	ptoms a	nd receiv	e treatr	ment for a	anaphyla	ixis		
<ul> <li>The no</li> <li>Stude</li> <li>WHS s</li> <li>The no</li> <li>Stude</li> <li>The no</li> <li>EISD v</li> <li>The no</li> <li>The no</li> </ul>	urse will nts who s students urse will nts who s urse will vill provio urse will urse will urse will urse will	upload the self-carry will commoder the self-carry alert mainde allergy document review the communical school	ne studer epineph mit to ca dications he stude epineph ntenance and ana at all aller ne emerg icate wit	nt's Emer arine will rry an Ep and Eme nt's Eme arine will e about v aphylaxis rgic react gency res h parents	gency C commit iPen or c ergency C verbaliz vasp, be training cions and ponse to s and he		n Skywa their aut t on the s for fiel annually erstandii e ant infe I person ent axis to ic provide	rd under o-injecto ir person d trips if with the ng of the estations nel via mel via mers as need	IHP for rs at sch unless i the student student Emerge that are andator portuni	teachers fool and a t is stored ent's epi t or paren ncy Care reported y annual ties for in	and school d in the conephrine of Plan I by teac online tr	ool perso I-sponsor clinic per e is stored hers and raining	nnel ed even parent r I in the c	ts equest clinic
											 Da			
Parent/Guardia	Date			School Nurse										