5601 Asthma and Allergic Reaction Protocol

This is a required policy under NDE Rule 59.

The District will adopt and implement the Emergency Response to Life-Threatening Asthma or Systemic Allergic Reactions (Anaphylaxis Protocol as required by the Nebraska Department of Education.

The Superintendent, in conjunction with licensed health personnel, shall establish administrative regulations for the implementation of this policy. The regulations established shall comply with NDE rules regarding the protocol to follow in case of a life-threatening asthma or systemic allergic reaction and use of an EpiPen and albuterol. Also, these shall ensure that each school building will procure and maintain the equipment and medication necessary under the protocol in the case of any student or school staff emergency. Staff training in using the protocol shall occur periodically. Records of such training and occurrences of administering medication under the protocol shall be maintained.

The Emergency Protocol shall be implemented, and the equipment and medication necessary to implement the Emergency Protocol shall be maintained, at each school building while school is in session. For purposes of the Emergency Protocol, the phrase "while school is in session" is defined as the core instructional school day. The "core instructional school day" is defined as that portion of each day school is in session during which teachers are on duty to provide and students are scheduled to receive instruction in the School District's curriculum, generally beginning at 8:00 a.m. and ending at 3:30 p.m. The Emergency Protocol shall not be required to be implemented other than in the school buildings while school is in session, and as such is not required to be implemented at extracurricular activities, on school buses, or during school field trips. Implementation of the Emergency Protocol at such non-mandatory times or places shall be made in the discretion of the administration and shall be subject to the availability of the employees designated or trained in implementation of the Emergency Protocol and the availability of the necessary equipment and medication at such times or places.

The parent or guardian of a student of minority age may sign a waiver requesting that their student not receive emergency treatment under this protocol. Information about the waiver shall be provided to parents in the student handbook.

Legal Reference: NDE Rule 59.006

Cross Reference: Policies on Administration of Medication to Students

Adopted: June 13, 2005

Reviewed: July 14, 2008, July 13, 2009, July 12, 2010, July 11, 2011, Jan. 9, 2012, Apr. 8, 2013, Apr. 14, 2014, Apr. 13, 2015, Apr. 11, 2016, Apr. 10, 2017, Apr. 9, 2018, June 10, 2019, August 10, 2020, May 10, 2021, May 9, 2022, May 8, 2023, May 13, 2024

Asthma and Allergic Reaction Protocol Form

EMERGENCY RESPONSE TO LIFE-THREATENING ASTHMA OR SYSTEMIC ALLERGIC REACTIONS (ANAPHYLAXIS)

DEFINITION: Life-threatening asthma consists of an acute episode of worsening airflow obstruction. Immediate action and monitoring are necessary.

A systemic allergic reaction (anaphylaxis) is a severe response resulting in cardiovascular collapse (shock) after the injection of an antigen (e.g. bee or other insect sting), ingestion of a food or medication, or exposure to other allergens, such as animal fur, chemical irritants, pollens or molds, among others. The blood pressure falls, the pulse becomes weak, AND DEATH CAN OCCUR. Immediate allergic reactions may require emergency treatment and medications.

LIFE-THREATENING ASTHMA SYMPTOMS: Any of these symptoms may occur:

Chest tightness

Wheezing

Severe shortness of breath

Retractions (chest or neck "sucked in")

Cyanosis (lips and nail beds exhibit a grayish or bluish color)

Change in mental status, such as agitation, anxiety, or lethargy

A hunched-over position

Breathlessness causing speech in one-to-two word phrases or complete inability to speak

ANAPHYLACTIC SYMPTOMS OF BODY SYSTEM: Any of the symptoms may occur within seconds. The more immediate the reactions, the more severe the reaction may become. Any of the symptoms present requires several hours of monitoring.

Skin: warmth, itching, and/or tingling of underarms/groin, flushing, hives

Abdominal: pain, nausea and vomiting, diarrhea

Oral/Respiratory: sneezing, swelling of face (lips, mouth, tongue, throat), lump or tightness in the throat, hoarseness, difficulty inhaling, shortness of breath, decrease in peak flow meter reading, wheezing reaction

Cardiovascular: headache, low blood pressure (shock), lightheadedness, fainting, loss of consciousness, rapid heart rate, ventricular fibrillation (no pulse)

Mental status: apprehension, anxiety, restlessness, irritability

EMERGENCY PROTOCOL:

- 1. CALL 911
- 2. Summon school nurse if available. If not, summon designated trained, non-medical staff to implement emergency protocol
- 3. Check airway patency, breathing, respiratory rate, and pulse
- 4. Administer medications (EpiPen and albuterol) per standing order
- 5. Determine cause as quickly as possible
- 6. Monitor vital signs (pulse, respiration, etc.)
- 7. Contact parents immediately and physician as soon as possible
- 8. Any individual treated for symptoms with epinephrine at school will be transferred to medical facility

STANDING ORDERS FOR	RESPONSE TO LIFE	-THREATENING AS	STHMA OR
ANAPHYLAXIS: Administer	an IM EpiPen-Jr. for a cl	hild less than 50 pound	ds or an adult
EpiPen for any individual over	50 pounds. Follow with n	ıebulized albuterol (pre	emixed) while
awaiting EMS. If not better, m	ay repeat times two, back-t	io-back Administer CP	R, if indicated
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(PHYSICIAN)	Date	