

**Allergy Action Plan for Mitchell Road Christian Academy**

Student's Name \_\_\_\_\_ Goes by \_\_\_\_\_ D.O.B. \_\_\_\_\_

Insert  
Child's  
Picture

Teacher/Grade \_\_\_\_\_ Doctor \_\_\_\_\_ Weight \_\_\_\_\_ lbs

Risk of Anaphylaxis to the following Allergens \_\_\_\_\_

Extremely reactive to the following allergens: \_\_\_\_\_

THEREFORE:

- If checked, give epinephrine immediately if the allergen was LIKELY eaten, for ANY symptoms.
- If checked, give epinephrine immediately if the allergen was DEFINITELY eaten, even if no symptoms are apparent.

FOR ANY OF THE FOLLOWING:

## SEVERE SYMPTOMS



### LUNG

Shortness of breath, wheezing, repetitive cough



### HEART

Pale or bluish skin, faintness, weak pulse, dizziness



### THROAT

Tight or hoarse throat, trouble breathing or swallowing



### MOUTH

Significant swelling of the tongue or lips



### SKIN

Many hives over the body, widespread redness



### GUT

Repetitive vomiting, severe diarrhea



### OTHER

Feeling something bad is about to happen, anxiety, confusion



### OR A COMBINATION

of symptoms from different body areas



- 1. INJECT EPINEPHRINE IMMEDIATELY.**
- 2. Call 911.** Tell emergency dispatcher the person is having anaphylaxis and may need epinephrine when emergency responders arrive.
  - Consider giving additional medications following epinephrine:
    - » Antihistamine
    - » Inhaler (brochodilator) if wheezing
  - Lay the person flat, raise legs, and keep warm. If breathing is difficult or they are vomiting, let them sit up or lie on their side.
  - **If symptoms do not improve, or symptoms return, more doses of epinephrine can be given about 5 minutes or more after the last dose.**
  - Alert emergency contacts
  - Transport patient to the ER, even if symptoms resolve. Patient should remain in ER for at least 4 hours because symptoms may return.

## MILD SYMPTOMS



### NOSE

Itchy or runny nose, sneezing



### MOUTH

Itchy Mouth



### SKIN

A few hives, mild itch



### GUT

Mild nausea or discomfort

FOR MILD SYMPTOMS FROM MORE THAN ONE SYSTEM AREA, GIVE EPINEPHRINE.

FOR MILD SYMPTOMS FROM A SINGLE SYSTEM AREA, FOLLOW THE DIRECTIONS BELOW:

1. Antihistamines may given, if ordered by a healthcare provider.
2. Stay with the person; alert emergency contacts.
3. Watch closely for changes. If symptoms worsen, give epinephrine.

## MEDICATIONS/DOSES

Epinephrine Brand or Generic: \_\_\_\_\_

Epinephrine:  0.15 mg IM     0.3 mg IM

Antihistamine Brand or Generic: \_\_\_\_\_

Antihistamine Dose: \_\_\_\_\_

Other (e.g., inhaler-bronchodilator if wheezing): \_\_\_\_\_

Parent/Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

Doctor Name \_\_\_\_\_ Doctor Phone \_\_\_\_\_

Doctor's Signature \_\_\_\_\_ (Required) Date \_\_\_\_\_

Parent/Legal Guardian \_\_\_\_\_ Cell Number \_\_\_\_\_

Parent/Legal Guardian \_\_\_\_\_ Cell Number \_\_\_\_\_

Emergency Contact: Name/Relationship \_\_\_\_\_ Cell Number \_\_\_\_\_

**PLEASE COMPLETE THIS STATEMENT ONLY IF STUDENT IS TO SELF-ADMINISTER**

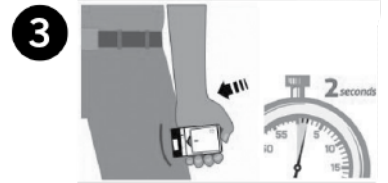
I have seen this child and agree with all of the information provided on this authorization form. This student is allowed to self-administer this medication in the classroom and any area of the school or school grounds, at a school-sponsored activity, and to and from a school-sponsored activity and understands the implications of doing so. He/she has demonstrated competency in self-monitoring and self-administration of this medication. The parents are aware that they cannot hold Mitchell Road Christian Academy responsible for the adverse outcome of this action.

Physician's Signature \_\_\_\_\_ Initials \_\_\_\_\_ Date \_\_\_\_\_

Office Address \_\_\_\_\_ Office Phone \_\_\_\_\_

**HOW TO USE AUVI-Q® (EPINEPHRINE INJECTIONS, USP), KALEO**

1. Remove Auvi-Q from the outer case. Pull off the red safety guard.
2. Place the black end of Auvi-Q against the middle of the lower thigh.
3. Press firmly until you hear a click and hiss sound, and hold in place for 2 seconds.
4. Call 911 and get emergency medical help right away.



**HOW TO USE EPIPEN®, EPIPEN JR (EPINEPHRINE) AUTO-INJECTOR AND EPINEPHRINE INJECTION (AUTHORIZED GENERIC OF EPIPEN), USP AUTO-INJECTOR, MYLAN AUTO-INJECTOR, MYLAN**

1. Remove the EpiPen or EpiPen Jr Auto-Injector from the clear carrier tube.
2. Grasp the auto-injector in your fist with the orange tip (needle end) pointing downward. With your other hand, remove the blue safety release by pulling straight up.
3. Swing and push the auto-injector firmly into the middle of the outer thigh until it clicks. Hold firmly in place for 3 seconds. (Count slowly 1, 2, 3.)
4. Remove and massage the area for 10 seconds.
5. Call 911 and get emergency medical help right away.

