

Ware County School Health Services
Allergy & Anaphylaxis Emergency Plan of Care for School Year 2023 - 2024

Student Information

Student Name: _____ DOB: ___/___/___ Sex: _____ Race: _____
 School: _____ Homeroom Teacher: _____ Grade: _____

Medications

Epinephrine Brand or Generic	Epinephrine Dose	Antihistamine Brand or Generic	Antihistamine Dose	Other (e.g., inhaler-bronchodilator if wheezing)
	<input type="checkbox"/> 0.15 mg IM <input type="checkbox"/> 0.3 mg IM			

If an **Inhaler** or **Epinephrine Kit** has been ordered, this student has been trained in its use, is responsible, and may carry on person at all times _____ yes _____ no (initial one). These orders remain in effect until discontinued in writing by parent and/or physician.

Weight: _____ lbs. Does student have **Asthma** _____ **YES** (higher risk for a severe reaction) _____ **NO**

NOTE: Do not depend on antihistamines or inhalers (bronchodilators) to treat a severe reaction. **USE EPINEPHRINE.**

ALLERGENS

Allergy to: _____

Extremely reactive to the following allergens: _____

- 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.

Special instructions to follow after allergen exposure.

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:

1. GIVE EPINEPHRINE
2. Alert emergency contacts.
3. Transport patient to ER, even if symptoms resolve.

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

1. Antihistamines may be 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.

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 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.

FOR ANY SEVERE SYMPTOMS:

1. **INJECT EPINEPHRINE IMMEDIATELY.**
2. **CALL 911.** Tell emergency dispatcher the person is having anaphylaxis and may need epinephrine when emergency responders arrive.
3. Consider giving additional medications following epinephrine: antihistamine and/or inhaler (bronchodilator) if wheezing
4. 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.
5. If symptoms do not improve or symptoms return, more doses of epinephrine can be given about **5 minutes or more** after the last dose.
6. Alert emergency contacts.
7. Transport patient to ER, even if symptoms resolve.

Physician Name: _____ Office Number: _____

Physician Signature (No Stamp Please) X _____ Date _____

Parent/Guardian Name: _____ Phone Number: _____

Parent/Guardian Signature X _____ Date: _____

Parent/Guardian signature indicates acknowledgement and release for sharing medical information between our student's physician and other health care providers and authorizing the designates school nurse to share medical information with other school employees as necessary.