

Allergy Response Plan

Student's Name: _____

DOB: _____

Teacher/Class: _____ School: _____

ALLERGY TO: _____

High risk for severe reaction (e.g. hx asthma): _____ Yes _____ No

Attach Photo Here

General Signs of Severe Allergic Reaction:

Systems: Symptoms:

Mouth: Itching and swelling of lips, tongue or mouth

Throat*: Itching and/or a sense of tightness in throat, hoarseness, and hacking cough
Skin: hives, itchy rash, and/or swelling of face or extremities

Gut: Nausea, abdominal cramps, vomiting and/or diarrhea

Lung*: Shortness of breath, repetitive coughing and/or wheezing

Heart*: "Thready pulse", "passing out"

Note: the severity of symptoms can change quickly.

*These symptoms can potentially progress to a life-threatening situation.

If Exposure to Allergen is Suspected and/or Symptoms are:

1. Give (medicine/dose/route) _____ IMMEDIATELY!
2. Then call 911/EMS (ask for advanced life support) following school procedures for 911.
3. Call parent/guardian _____ or emergency contacts.
4. Call Dr. _____ at _____

DO NOT HESITATE TO CALL 911!

Trained School Staff

1. _____ Title _____ Room _____
2. _____ Title _____ Room _____
3. _____ Title _____ Room _____

Emergency Contacts (other than Parent/Guardian)

1. _____ Phone: _____
Relationship: _____
2. _____ Phone: _____
Relationship: _____

Nurse's signature: _____ Date: _____

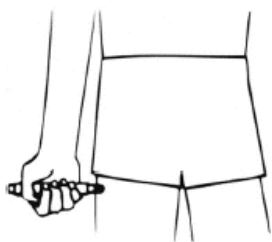
Parent/Guardian signature: _____ Date: _____

EPIPEN® AND EPIPEN® JR. DIRECTIONS

1. Pull off gray activation cap.



2. Hold black tip near outer thigh (always apply to thigh).



3. Swing and jab firmly into outer thigh until Auto-Injector mechanism functions. Hold in place and count to 10. The EpiPen® unit should then be removed and taken with you to the Emergency Room. Massage the injection area for 10 seconds.

(Adapted from the Food Allergy and Anaphylaxis Network)

Specific training on the Allergy Response Plan (including administration of epi-pen in an emergency if nurse is unavailable) to be given by school nurse to these school staff:

_____	_____
_____	_____
_____	_____