

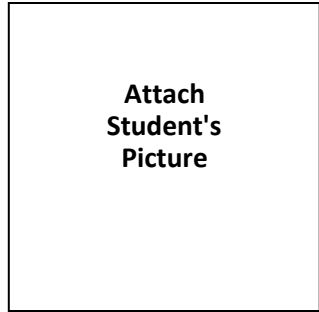
MANSFIELD PUBLIC SCHOOLS
Allergy and Anaphylaxis Emergency Plan

Student: _____ Date of birth: ____/____/____

Grade: _____ Teacher/Team/YOG: _____

Allergy to: _____

Student has asthma: Yes No



ATTENTION:

- If checked, give epinephrine IMMEDIATELY if the allergen was eaten, for **ANY** symptoms
- If checked, give epinephrine IMMEDIATELY if the allergen was eaten, **EVEN IF NO** symptoms are apparent

<p>Severe Allergic Reaction and Anaphylaxis: </p> <p>What to look for:</p> <p>If student has ANY of these severe symptoms after exposure to allergen, give epinephrine:</p> <ul style="list-style-type: none"> Shortness of breath, wheezing, or coughing Skin color is pale or has a bluish color Weak pulse Fainting or dizziness Tight or hoarse throat Trouble breathing or swallowing Swelling of lips or tongue that bother breathing Vomiting or diarrhea (if severe or combined with other symptoms) Many hives or redness over body Feeling of "doom," confusion, altered consciousness, or agitation 	<p>GIVE EPINEPHRINE!</p> <p>What to do:</p> <ol style="list-style-type: none"> 1. Inject epinephrine right away! Note the time when epinephrine was given. 2. Call 911. Tell EMS when epinephrine was given. 3. Stay with student. 4. Call School Nurse and/or Parent/Guardian 5. DO NOT USE OTHER MEDICINES IN PLACE OF EPINEPHRINE! Nurse may give other medicine if prescribed which may include antihistamines or inhaler/bronchodilator 6. Staff member will accompany student to ER if parent/guardian not available
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<p>Mild Allergic Reaction: What to look for: </p> <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> <p>NOSE Itchy or runny nose, sneezing</p> </div> <div style="text-align: center;"> <p>MOUTH Itchy mouth</p> </div> <div style="text-align: center;"> <p>SKIN A few hives, mild itch</p> </div> <div style="text-align: center;"> <p>GUT Mild nausea or discomfort</p> </div> </div> <p>If the student has ONE mild symptom from body systems pictured above, monitor student.</p>	<p>MONITOR STUDENT!</p> <p>What to do:</p> <p>Stay with student and:</p> <ul style="list-style-type: none"> Watch child closely Call School Nurse School Nurse give additional medications Call parent/guardian If symptoms of severe allergic reaction develop or MORE THAN ONE SYSTEM INVOLVED, use epinephrine (See Severe Allergic Reaction...)
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Medicines/Doses:
 Epinephrine, intramuscular to outer thigh: _____ Dose: 0.15 mg 0.30mg

Other medication to be given after epinephrine: _____

Medication to be given for mild symptom: _____

Patient may self-administer epinephrine: YES NO

Patient may carry medications: YES NO

Parent/Guardian Contact Information:

Name: _____ Relationship: _____

Phone: Home: _____ Cell: _____ Work: _____

**DO NOT HESITATE TO ADMINISTER MEDICATION OR CALL 911
 EVEN IF PARENT/GUARDIAN OR SCHOOL NURSE CANNOT BE REACHED!**

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ADDITIONAL INFORMATION:

- It is the responsibility of the parent/guardian to notify the bus company of allergies requiring epinephrine by sending the bus form to them before the start of each school year. Please see school website. ([Mansfield Public School / Departments / Health Services / MPS Forms & Careplans / CONNOLLY Bus Company](#))
- Nurse will communicate with teachers (general education teachers and specialists) prior to school to review allergy plan. Nurses will review symptoms and the protocols for responding.
- In elementary classrooms where snack is part of the school day, parent/guardian will be notified that a student in the classroom has a life-threatening food allergy and to which specific foods. Classroom snacks containing specific food should be avoided
- "Allergen free space" is available to students as needed (i.e.: allergen free lunch table)
- Parent/Guardian will be given notice of any field trip and shall be allowed to attend said field trip.
- Substitute folder will include information about life threatening food allergies.
- School staff participate in annual mandated health training which includes education on signs & symptoms of anaphylactic reaction and epinephrine administration.
- Per district protocol, "food in the curriculum approval form" to be completed by school staff prior to the use of food in the classroom.
- Per district [Wellness Policy](#), all celebrations (i.e., birthdays or holidays) will be non-food events.
- 911 will be called for any student receiving emergency epinephrine.
- Per district protocol, if student needs to be taken to a hospital and the parent/guardian is unable to accompany the student, another staff designated by principal will accompany the student (school staff are generally not permitted to ride in an ambulance. Staff will follow in a private car and meet at the hospital). School staff may leave when a parent/guardian arrives.
- Parent/guardian will keep school nurses and teachers informed of any changes in medical status

Parent/Guardian Authorization/Signature: _____ Date: _____

Physician/Provider Authorization/Signature: _____ Date: _____

- ★ **Signature** permits the nurse to administer this medication and to communicate with the named physician relative to the diagnosis and share this information with school staff or Emergency Medical personnel.
- ★ **Signature** gives the nurse permission to delegate epinephrine administration to trained unlicensed school personnel if a nurse is not immediately available (such as a teacher while on a field trip).
- ★ **Signature** indicates understating that, per the Massachusetts Department of Public Health, PRN (as needed) medication (e.g. Benadryl, Zyrtec) **CANNOT** be delegated to unlicensed staff on field trips.
- ★ **Signature** denotes it is the parent/guardian's responsibility to notify coaches or staff of any after school extracurricular activity of any medical issues of their student.
- ★ **Signature** denotes understanding that it is the parent/guardian's responsibility to pick-up medication when it is no longer needed at school and that medication will be properly disposed of after its expiration date or on the last day of school year.

ADMINISTRATION & SAFETY INFORMATION FOR ALL AUTO-INJECTORS

- **Never put your thumb, fingers, or hand over the orange/red tip** of the auto-injectors.
- The needle always comes out of orange/red tip.
- Accidental injection into fingers, hands, or feet may cause restriction of blood flow to those areas.
- In case of accidental injections, go immediately to the nearest emergency room. Tell the healthcare provider where on your body you received the accidental injection.
- Auto-injectors should only be injected into the anterolateral aspect of the outer thigh (middle of the outer side of your thigh-upper leg).
- Do not inject into any body part other than mid-outer thigh.
- If administering to a young child, hold their leg firmly in place and limit movement before and during injection to prevent injuries.
- Epinephrine can be injected through clothing if needed.
- Give the used auto-injector to the healthcare provider for inspection and proper disposal.
- **Always call 911 immediately after administering auto-injector.**