

ANAPHYLAXIS POLICY

It is the policy of Norton City Schools to provide at least two (2) doses of auto-injectable epinephrine (hereinafter called 'unassigned or stock epinephrine') in each school, to be administered by a school nurse or employee of the school board who is authorized and trained in the administration of epinephrine to any student, staff or visitor believed to be having an anaphylactic reaction on school premises, during the academic day. The ORC 3313.7110D provides civil protection for employees of a school board who are appropriately trained to administer epinephrine.

Policy Limitations

Parents of student with known life threatening allergies and/or anaphylaxis should provide the school with written instructions from the students' health care provider for handling anaphylaxis and all necessary medications for implementing the student specific order on an annual basis. This anaphylaxis policy is not intended to replace student specific orders or parent provided individual medications. This policy **does not** extend to activities off school grounds (including transportation to and from school, field trips, etc.) or outside of the academic day (sporting events, extra-curricular activities, etc.).

Overview

Anaphylaxis is a severe systemic allergic reaction from exposure to allergens that is rapid in onset and can cause death. Common allergens include animal dander, fish, latex, milk, shellfish, tree nuts, eggs, insect venom, medications, peanuts, soy, and wheat. A severe allergic reaction usually occurs quickly; death has been reported to occur within minutes. An anaphylactic reaction can occur up to one to two hours after exposure to the allergen.

Symptoms of Anaphylaxis

- Shortness of breath or tightness of chest: difficulty in our absence of breathing
- Sneezing, wheezing or coughing
- Difficulty swallowing
- Swelling of lips, eyes, face, tongue, throat or elsewhere
- Low blood pressure, dizziness and/or fainting
- Heart beat complaints: rapid or decreased
- Blueness around lips, inside lips, eyelids
- Sweating and anxiety
- Itching, with or without hives, raised red rash in any area of the body
- Skin flushing or color becomes pale
- Hoarseness

- Sense of impending disaster or approaching death
- Loss of bowel or bladder control
- Nausea, abdominal pain, vomiting and diarrhea
- Burning sensation, especially face or chest
- Loss of consciousness

Although anaphylactic reactions typically result in multiple symptoms, reactions may vary. A single symptom may indicate anaphylaxis. **Epinephrine should be administered promptly at the first sign of anaphylaxis. It is safer to administer epinephrine than to delay treatment for anaphylaxis.**

Training

Building level administration shall be responsible for identifying at least two employees, in addition to the school nurse (RN or LPN), to be trained in the administration of epinephrine by auto-injector. Only trained personnel should administer epinephrine to a student believed to be having an anaphylactic reaction. Training shall be conducted in accordance with the most current edition of the Ohio Department of Health's: *Ohio Department of Health Medication Administration in Ohio Schools: Training for School Personnel*. Training shall be conducted annually or more often as needed.

Standing Orders

Standing orders are written to cover multiple people as opposed to individual-specific orders, which are written for one person. Norton City Schools shall designate an authorized medical provider (MD, DO, PA or NP with prescriptive authority) to prescribe non-student specific epinephrine for the school division. To be administered to any student believed to be having an anaphylactic reaction on school grounds, during the academic day. Standing orders must be renewed annually and with any change in prescriber.

Responding to Anaphylaxis

If student-specific orders are on file they should be followed for students with known life threatening allergies and/or anaphylaxis.

For suspected anaphylaxis without specific orders, see current "Standing Order".

Post Event Actions

Once epinephrine is administered, local Emergency Medical Services (911) shall be activated and the student transported to the emergency room for follow care. In some reactions, the symptoms go away, only to return one to three hours later. This is called a "biphasic reaction." Often these second-phase symptoms occur in the respiratory tract and may be more severe than the first-phase symptoms. Therefore, follow up care with a health care

provider is necessary. The student will not be allowed to remain at school or return to school on the day epinephrine is administered.

- Document the event
- Complete incident report
- Replace epinephrine stock medication immediately

Storage, Access and Maintenance

Epinephrine should be stored in a safe, unlocked and accessible location, in a dark place at room temperature (between 59-86 degrees F). Epinephrine should not be maintained in a locked cabinet or behind locked doors. Staff should be made aware of the storage location in each school. It should be protected from exposure to heat, cold or freezing temperatures. Exposure to sunlight will hasten deterioration of epinephrine more rapidly than exposure to room temperatures. The expiration date of epinephrine solutions should be periodically checked; the drug should be replaced if it is approaching the expiration date. The contents should periodically be inspected through the clear window of the auto-injector. The solution should be clear; if it is discolored or contains solid particles, replace the unit.

Each school should maintain documentation that stock epinephrine has been checked on a monthly basis to ensure proper storage, expiration date, and medication stability.

The school division shall maintain a sufficient number of extra doses of epinephrine for replacement of used or expired school stock on the day it is used or discarded. Expired auto-injectors or those with discolored solution or solid particles should not be used. Discard them in a sharps container.

STANDING ORDER

AUTO-INJECTOR EPINEPHRINE ADMINISTRATION FOR ANAPHYLAXIS

In the event of an anaphylactic reaction in an individual in the school setting, epinephrine will be administered by the school nurse or trained unlicensed school personnel. This Standing Order is for the use of auto-injector epinephrine in such situations.

In the case of students with a history of anaphylaxis or other severe allergic reactions, epinephrine should be administered according to specific individualized prescriptive orders documented in their individualized health care plans. If no such orders exist or are not readily available, the Standing Orders given in this document should be used.

DEFINITION: **Anaphylaxis** is a severe allergic reaction which can be life threatening and occur within minutes after a triggering event or up to hours later.

CAUSES: Extreme sensitivity to one or more of the following:

Medication	Exercise induced	Foods	Latex
Idiopathic (unknown)	Insect stings	Other	Asthma triggers

PHYSICAL FINDINGS: Common symptoms associated with anaphylaxis:

1. Difficulty breathing, wheezing
2. Hives, generalized flushing, itching, or redness of the skin
3. Swelling of the throat, lips, tongue, throat; tightness/change of voice; difficulty swallowing
4. Tingling sensation, itching, or metallic taste in mouth
5. Feeling of apprehension, agitation

STANDING ORDER:

1. Based on symptoms, determine that an anaphylactic reaction appears to be occurring. Act quickly. It is safer to give epinephrine than to delay treatment.
Anaphylaxis is a life-threatening reaction.
2. (If you are alone and are able to provide epinephrine, call out or yell for help as you immediately go get the epinephrine. Do not take extra time seeking others until you have provided the epinephrine.)
3. (If you are alone and do not know how to provide epinephrine, call out or yell for help. If someone is available to help you, have them get the personnel trained to provide epinephrine and the epinephrine while you dial 911 and follow the dispatcher's instructions. Advise 911 operator that anaphylaxis is suspected and epinephrine is available. Your goal is to get someone (EMS or trained personnel) to provide epinephrine and care as soon as possible.)
4. Select appropriate epinephrine auto-injector to administer, based on weight.

Dosage: 0.15 mg Epinephrine auto-injector IM, if less than 60 pounds
 0.30 mg Epinephrine auto-injector IM, if 60 pounds or greater

Frequency: If symptoms continue, a second dose should be administered 5 to 15 minutes after first dose

5. Inject epinephrine via auto-injector: Pull off safety release cap. Swing and jab firmly into upper, outer thigh, (through clothing if necessary). **Hold in place for 10 seconds to deliver medication and then remove.** Massage the area for 10 more seconds. Note the time.
6. Call or have a bystander call 911 immediately or activate the Emergency Medical System (EMS). Advise 911 operator that anaphylaxis is suspected and epinephrine has being given.
7. Keep the individual either lying down or seated. If they lose consciousness, check if they are breathing and have a pulse. If not, begin CPR (cardiopulmonary resuscitation), call out for help and continue CPR until the individual regains a pulse and is breathing or until EMS arrives and takes over.
8. Call School Nurse/Front Office school personnel and advise of situation.
9. Repeat the dose after 5 to 15 minutes if symptoms persist or return.
10. Stay with the individual until EMS arrives, continuing to follow the directions in No. 7 above.
11. Provide EMS with Epinephrine auto injector labeled with name, date, and time administered to transport to the ER with the student.

FOLLOW UP (to be done the same day as the event):

4. Assure parents/guardians have been notified.
5. Complete required documentation of incident.
6. Order replacement epinephrine auto injector(s).

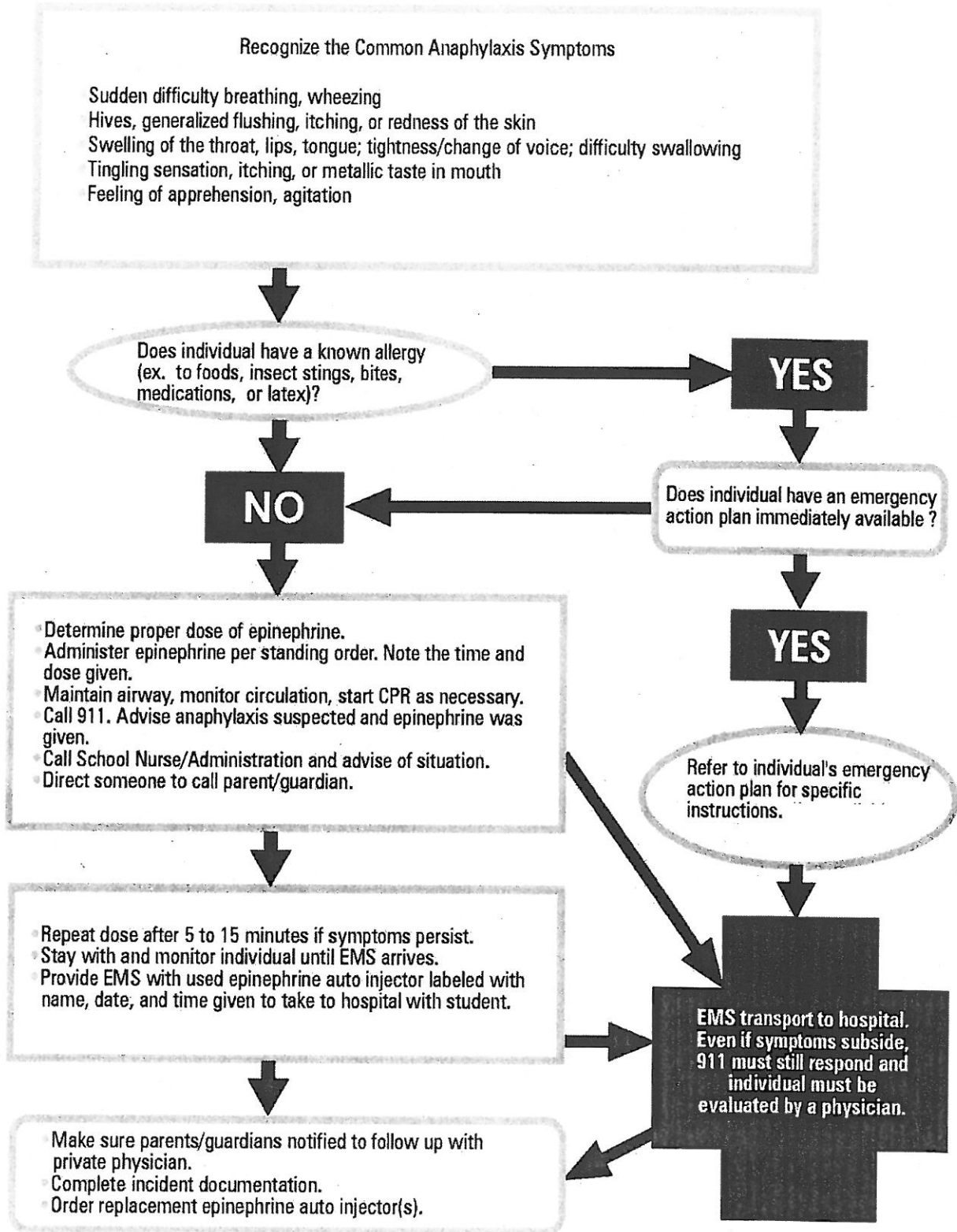
Physician/Licensed Prescriber Signature _____ Date _____

Print Name, please _____

* Effective for School Year _____

*Must be renewed annually and with any change in prescriber.

Recognize Anaphylaxis Symptoms



Report of Anaphylactic Reaction

Demographics and Health History

1. Name: _____ Name of School: _____
2. DOB: _____ Status of Person: Student Staff Visitor Gender: M F
3. History of allergy: Yes No Unknown If known, specify type of allergy: _____
- If yes, was allergy action plan available? Yes No Unknown History of prior anaphylaxis: Yes No Unknown
- Diagnosis/History of asthma: Yes No Unknown

School Plans and Medical Orders

4. Individual Health Care Plan (IHCP) in place? Yes No Unknown
5. Does the student have a student specific order for epinephrine? Yes No Unknown
6. Source of epinephrine (ex. student provided, stock epinephrine): _____ Expiration date of epinephrine _____ Unknown

Epinephrine Administration Incident Reporting

7. Date/Time of occurrence: _____ Vital signs: BP ____/____ Temp ____ Pulse ____ Respiration ____
8. Specify suspected trigger that precipitated this allergic episode:
- Food Insect Sting Exercise Medication Latex Other _____ Unknown
- If food was a trigger, please specify suspected food _____
- Please check: Ingested Touched Inhaled Other specify _____
9. Did reaction begin prior to start of school day? Yes No Unknown
10. Location where symptoms developed:
- Classroom Cafeteria Health Office Playground Bus Other specify _____
11. How did exposure occur?

12. Symptoms: (Check all that apply)

Respiratory

- Cough
 Difficulty breathing
 Hoarse voice
 Stuffy or runny nose
 Swollen throat or tongue
 Shortness of Breath
 Stridor
 Tightness (chest, throat)
 Wheezing

GI

- Abdominal discomfort
 Diarrhea
 Difficulty swallowing
 Oral itching
 Nausea
 Vomiting

Skin

- Angioedema
 Flushing
 General itching
 General rash
 Hives
 Lip swelling
 Localized rash
 Paleness

Cardiac/Vascular

- Chest discomfort
 Cyanosis
 Dizziness
 Faint/Weak pulse
 Headache
 Low blood pressure
 Rapid heartbeat

Other

- Sweating
 Irritability
 Loss of consciousness
 Metallic taste
 Red eyes
 Sneezing
 Uterine cramping

13. First Epinephrine Dose (amt.) _____ Site (ex. upper left thigh) _____ Time: _____ Initials: _____

Second Epinephrine Dose (amt.) _____ Site _____ Time: _____ Initials: _____

14. Location where epinephrine administered: Health Office Other specify _____

15. Location of epinephrine storage: Health Office Other specify _____

16. Epinephrine administered by: RN Self Other (print name) _____

17. Parent or guardian notified of epinephrine administration: Yes No Time: _____
By whom: _____

18. Biphasic reaction: Yes No Don't know

Disposition

19. EMS notified at: (time) _____ By whom _____
 Transported to hospital emergency department: Yes No If "No", reason _____
 If yes, transferred via ambulance Parent/Guardian Other

20. Student/Staff/Visitor outcome: _____

School Follow-up

21. Were parents or guardians advised to follow up with student's medical provider? Yes No

22. Were arrangements made to restock epinephrine? Yes No

NOTES: _____

24. Form completed by: _____ Date: _____
 (please print)

Signature: _____ Title: _____