Hurst-Euless-Bedford ISD
School Health Services
Severe Food Allergy Action Plan

Student: ___________________________ DOB: ___________________________ Grade: ___________________________

Allergy: ___________________________ History of Asthma: Yes (higher risk for severe reaction) No

Extremely reactive to the following:

☐ If checked, give epinephrine immediately for ANY symptoms if the allergen was likely eaten.

☐ If checked, give epinephrine immediately if the allergen was definitely eaten, even if no symptoms present.

Any SEVERE SYMPTOMS after suspected or know ingestion:
One or more of the following:

Lungs: Shortness of breath, wheeze, repetitive cough
Heart: Pale, blue, faint, weak pulse, dizzy, confused
Throat: Tight, hoarse, trouble breathing/swallowing
Mouth: Obstructive swelling (tongue or lips)
Skin: Many hives over body, redness/warmth

Or combination of symptoms from different body areas:
Skin: Hives, itchy rashes, swelling (eyes, lips)
Gut: Vomiting, diarrhea, crampy pain

Mild symptoms only:
Mouth: itchy mouth
Skin: a few hives around mouth/face, mild itch
Gut: mild nausea/vomiting

1. Immediately give Epinephrine
2. Call 911
3. Monitor student
4. Give additional medications*

*A second dose of epinephrine can be given 5 minutes or more after the first if symptoms persist or recur. For a severe reaction, consider keeping student lying on back with legs raised. Treat student even if parents cannot be reached.

MEDICATION DOSAGE AND ROUTE:

Epinephrine: ___________________________

Antihistamine: ___________________________

Other (inhaler-bronchodilator): ___________________________

Physician’s Signature: ___________________________ Date: ___________________________

Parent/Guardian Signature: ___________________________ Date: ___________________________

For self-administration only

This student has permission from physician & school nurse to carry EpiPen &/or Twinject
This student has been trained in the signs & symptoms of minor/major reactions.
This student has been trained & is capable of self-administering the Epi-Pen or Twinject
This student needs the supervision of an adult for self-administration

Yes ___ No ___
FOOD ALLERGY & ANAPHYLAXIS EMERGENCY CARE PLAN

HOW TO USE AUVI-Q® (EPINEPHRINE INJECTION, USP), KALEO
1. Remove Auvi-Q from the outer case.
2. Pull off red safety guard.
3. Place black end of Auvi-Q against the middle of the outer thigh.
4. Press firmly until you hear a click and hiss sound, and hold in place for 2 seconds.
5. Call 911 and get emergency medical help right away.

HOW TO USE EPIPIEN® AND EPIPIEN JR® (EPINEPHRINE) AUTO-INJECTOR AND EPINEPHRINE INJECTION (AUTHORIZED GENERIC OF EPIPIEN®), 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.
3. With your other hand, remove the blue safety release by pulling straight up.
4. Swing and push the auto-injector firmly into the middle of the outer thigh until it ‘clicks’.
5. Hold firmly in place for 3 seconds (count slowly 1, 2, 3).
6. Remove and massage the injection area for 10 seconds.
7. Call 911 and get emergency medical help right away.

HOW TO USE IMPAX EPINEPHRINE INJECTION (AUTHORIZED GENERIC OF ADRENACLICK®), USP AUTO-INJECTOR, IMPAX LABORATORIES
1. Remove epinephrine auto-injector from its protective carrying case.
2. Pull off both blue end caps; you will now see a red tip.
3. Grasp the auto-injector in your fist with the red tip pointing downward.
4. Put the red tip against the middle of the outer thigh at a 90-degree angle, perpendicular to the thigh.
5. Press down hard and hold firmly against the thigh for approximately 10 seconds.
6. Remove and massage the area for 10 seconds.
7. Call 911 and get emergency medical help right away.

HOW TO USE TEVA'S GENERIC EPIPIEN® (EPINEPHRINE INJECTION, USP) AUTO-INJECTOR, TEVA PHARMACEUTICAL INDUSTRIES
1. Quickly twist the yellow or green cap off of the auto-injector in the direction of the “twist arrow” to remove it.
2. Grasp the auto-injector in your fist with the orange tip (needle end) pointing downward.
3. With your other hand, pull off the blue safety release.
4. Place the orange tip against the middle of the outer thigh (upper leg) at a right angle (perpendicular) to the thigh.
5. Swing and push the auto-injector firmly into the middle of the outer thigh until it ‘clicks’.
6. Hold firmly in place for 3 seconds (count slowly 1, 2, 3).
7. Remove and massage the injection area for 10 seconds.
8. Call 911 and get emergency medical help right away.

ADMINISTRATION AND SAFETY INFORMATION FOR ALL AUTO-INJECTORS:
1. Do not put your thumb, fingers or hand over the tip of the auto-injector or inject into any body part other than mid-outter thigh. In case of accidental injection, go immediately to the nearest emergency room.
2. If administering to a young child, hold their leg firmly in place before and during injection to prevent injuries.
3. Epinephrine can be injected through clothing if needed.
4. Call 911 immediately after injection.

OTHER DIRECTIONS/INFORMATION (may self-carry epinephrine, may self-administer epinephrine, etc.):

Treat the person before calling emergency contacts. The first signs of a reaction can be mild, but symptoms can worsen quickly.

EMERGENCY CONTACTS — CALL 911

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<th>RESCUE SQUAD:</th>
<th>DOCTOR:</th>
<th>PARENT/GUARDIAN:</th>
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OTHER EMERGENCY CONTACTS

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