



ANAPHYLAXIS EMERGENCY TREATMENT PLAN

Early recognition of symptoms and immediate treatment could save this person's life.

Student's photo
2 x 2.5

_____ has a potentially life-threatening allergy (anaphylaxis) to:

- Peanut Tree Nuts Wheat Egg Milk
 Insect Stings (bees/wasps) Latex Other: _____
 Medication: _____

SIGNS AND SYMPTOMS: Think – F.A.S.T.:

A person experiencing an anaphylactic reaction might have one of the following symptoms:

- F. Face:** rash, itchiness, redness, swelling of face and tongue
- A. Airway:** trouble breathing, swallowing or speaking
- S. Stomach:** a stomach pain vomiting, diarrhea
- T. Total:** hives, rash, itchiness, swelling, weakness, pallor (paleness) sense of doom, loss of consciousness.

TREATMENT: Think – A.C.T.

- Administer the epinephrine auto injector (EpiPen) IMMEDIATELY, at the first sign of a reaction, in conjunction with the child's contact with their life threatening allergen.

Administer the injection in the lateral (outer) location of the thigh. Inject and count for 10 seconds. Remove the EpiPen, check needle is showing and message area for 10 seconds.

A second dose may be administered 10 – 15 minutes or sooner, if symptoms have not improved or worsened.

- Call 911. When informing the dispatcher use the term 'ANAPHYLACTIC' reaction.
- Transport to hospital by ambulance. Student must go to the hospital even if symptoms are mild or have stopped. Call parents/guardians.

Emergency Contact Information:

Name	Relationship	Home Phone	Work Phone	Cell Phone

The undersigned patient, parent or guardian authorizes an adult to administer epinephrine to the above-named person in the event of an anaphylactic reaction, as described above.

Patient/Parent/Guardian signature

Date

Physician's signature (optional)

- Parent grants permission for a copy of this form be given to their child's bus driver, where applicable (elementary students only). All school bus drivers have First Aid/CPR and EpiPen training.**

Photocopy Appendix E (EpiPen) on the reverse side of this form.

***Original –School
*** Copy – Halton Student Transportation Services
Fax Number: 905-637-4023

Transportation Services Staff Only

Bus#	AM	Noon	PM
Rte#	AM	Noon	PM