

Food Allergy Action Plan

Place
Child's
Picture
Here

Student's Name: _____ D.O.B: _____ Teacher: _____
 Allergy to: _____ Asthmatic: Yes* No *Higher risk for severe reaction

■ STEP 1: TREATMENT ■

Symptoms:

<ul style="list-style-type: none"> ▪ If a food allergen has been ingested, but <i>no symptoms</i>: ▪ Mouth Itching, tingling, or swelling of lips, tongue, mouth ▪ Skin Hives, itchy rash, swelling of the face or extremities ▪ Gut Nausea, abdominal cramps, vomiting, diarrhea ▪ Throat Tightening of throat, hoarseness, hacking cough ▪ Lungt Shortness of breath, repetitive coughing, wheezing ▪ Heart Weak or thready pulse, low blood pressure, fainting, pale, blueness ▪ Other† _____ 	<input type="checkbox"/> Epinephrine <input type="checkbox"/> Antihistamine <input type="checkbox"/> Epinephrine <input type="checkbox"/> Antihistamine <input type="checkbox"/> Epinephrine <input type="checkbox"/> Antihistamine <input type="checkbox"/> Epinephrine <input type="checkbox"/> Antihistamine <input type="checkbox"/> Epinephrine <input type="checkbox"/> Antihistamine <input type="checkbox"/> Epinephrine <input type="checkbox"/> Antihistamine <input type="checkbox"/> Epinephrine <input type="checkbox"/> Antihistamine <input type="checkbox"/> Epinephrine <input type="checkbox"/> Antihistamine
<ul style="list-style-type: none"> ▪ If reaction is progressing (several of the above areas affected), give: 	<input type="checkbox"/> Epinephrine <input type="checkbox"/> Antihistamine

†Potentially life-threatening. The severity of symptoms can quickly change.

DO dosage

Epinephrine: inject intramuscularly (circle one, and see reverse side for instructions)

EpiPen® EpiPen® Jr. Twinject® 0.3 mg Twinject® 0.15 mg Adrenaclick™ 0.3 mg Adrenaclick™ 0.15 mg

Antihistamine: give (medication/dose/route) _____

Other: give (medication/dose/route) _____

IMPORTANT: Asthma inhalers and/or antihistamines cannot be depended on to replace epinephrine in anaphylaxis.

■ STEP 2: EMERGENCY CALLS ■

1. Call 911 (or Rescue Squad: _____). State that an allergic reaction has been treated, and additional epinephrine may be needed.
2. Dr. _____ Phone Number: _____
3. Parent _____ Phone Number(s): _____
4. Emergency contacts:
 - a. Name/Relationship _____ Phone Number: _____
 - b. Name/Relationship _____ Phone Number: _____

EVEN IF PARENT/GUARDIAN CANNOT BE REACHED, DO NOT HESITATE TO MEDICATE OR TAKE CHILD TO MEDICAL FACILITY!

Parent/Guardian's Signature _____ Date _____

Doctor's Signature _____ Date _____
 (Required)

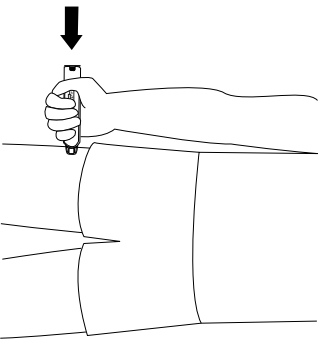
Staff Members Trained in Epinephrine Administration: _____

EPiPEN Auto-Injector and EPiPEN Jr Auto-Injector Directions

- First, remove the EPiPEN Auto-Injector from the plastic carrying case
- Pull off the blue safety release cap



- Hold orange tip near outer thigh (always apply to thigh)



- Swing and firmly push orange tip against outer thigh. Hold on thigh for approximately 10 seconds. Remove the EPiPEN Auto-Injector and massage the area for 10 more seconds



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Once epinephrine is used, call the Rescue Squad and request an ambulance equipped with epinephrine and a responder trained to administer this medication. Take the used unit with you to the Emergency Room. Plan to stay for observation at the Emergency Room for at least 4 hours.

For children with multiple food allergies, consider providing separate Action Plans for different foods. ***Medication checklist adapted from the Authorization of Emergency Treatment form developed by the Mount Sinai School of Medicine. Used with permission.*

Twinject® 0.3 mg and Twinject® 0.15 mg Directions



- Remove caps labeled “1” and “2.”
- Place rounded tip against outer thigh, press down hard until needle penetrates. Hold for 10 seconds, then remove.

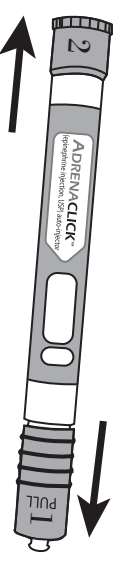


SECOND DOSE ADMINISTRATION: If symptoms don't improve after 10 minutes, administer second dose:

- Unscrew rounded tip. Pull syringe from barrel by holding blue collar at needle base.
- Slide yellow collar off plunger.
- Put needle into thigh through skin, push plunger down all the way, and remove.



Adrenaclick™ 0.3 mg and Adrenaclick™ 0.15 mg Directions



- Remove **GREY** caps labeled “1” and “2.”
- Place **RED** rounded tip against outer thigh, press down hard until needle penetrates. Hold for 10 seconds, then remove.

