

# **Guidelines for Health Personnel Roles Managing Student Anaphylaxis/Allergy**

	Unlicensed Assistant or Licensed Practical/Vocational Nurse (LPN/LVN)	Registered Nurse (RN)
I. CASE FINDING – Identify students with food allergies or a history of anaphylaxis who require emergency epinephrine (EAI)		
	Notify RN of students with anaphylaxis following established communication procedure.	Conduct case finding for anaphylaxis by reviewing data from a variety of sources including the student/ family, student health record, school staff,
2.	Identify students with anaphylaxis by reviewing the following at the beginning and throughout the school year:	health/medical records, health history form, emergency cards, field trip permission forms
	a. Forms and documents in the school health office (Emergency Cards, student health record medication forms, Early Childhood	Record health data in the paper or electronic student health record.
	Screening forms, primary care physical exam forms, field trip permission forms, new student health records, Anaphylaxis Action Plans and athletic physical exam forms)  b. Verbal or written reports from student, family, teachers or staff  c. Reports or notes FROM Emergency Department (ED) or hospital admissions	3. Obtain additional history as needed.
II. NURSING CARE PROCEDURES – Processes of anaphylaxis management at school – assessment, implementation of a management plan and communication with families and providers. Procedures include the delegation of certain tasks by the school nurse to trained, designated staff.		
1.	Collect Family Food Allergy Health History, medication authorization, Anaphylaxis Action Plans or other communications from parent/guardian and/or health care provider.	<ol> <li>The Family Food Allergy Health History is given annually to:</li> <li>Students requiring EAI or anti-histamine for emergency anaphylaxis management</li> <li>Newly identified or discovered students with</li> </ol>
2.	Distribute <i>Family Food Allergy Health History</i> , medication authorization, Anaphylaxis Action Plans or other forms on direction of the RN.	food allergy  Students with food allergy in which more information is needed.
		<ol> <li>Family Food Allergy Health History may be sent home with student, mailed, given to parent/guardian, or completed over phone if necessary.</li> </ol>
		3. Document in student health record Allergy Health History was given or sent to parent/guardian.



School Nurses	
	<ol> <li>Information from Allergy Health History is summarized in student health record nursing notes.</li> <li>Add "Allergy with potential for anaphylaxis" in student health record in uniform designated location.</li> <li>RN uses Family Food Allergy Health History to develop Individualized Health Plan.</li> <li>If student requires food substitutions or allergen free table, notify school food service department.</li> </ol>
Anaphylaxis Action Plan / Emergency Care Plan  1. Annually, send request for Anaphylaxis Action Plan  — Emergency Care Plan for students who require emergency medication (EAI or anti-histamine) for allergy exposure.  2. Give Anaphylaxis Action Plan / Emergency Care Plan to RN for review. If RN is not on site, contact RN or back-up RN as soon as possible.	<ol> <li>Anaphylaxis Action Plan / Emergency Care Plan</li> <li>Annually, send request for Anaphylaxis Action Plan – Emergency Care Plan for students who require emergency medication (EAI or anti-histamine) for allergy exposure.</li> <li>Review Anaphylaxis Action Plan / Emergency Care Plan when received and document in the student's health record.</li> <li>Place Anaphylaxis Action Plan / Emergency Care Plan in medication book, and/or emergency health plan folder, or designated standard location.</li> <li>Develop Anaphylaxis Action Plan / Emergency Care Plan for the classroom teacher(s) as needed,</li> <li>Distribute to all staff responsible for emergency treatment.</li> <li>Include one copy for teacher substitute folder. Place sticker on sub folder indicating presence of student in classroom with Anaphylaxis Action Plan / Emergency Care Plan.</li> </ol>
	<ol> <li>Individual Health Plan (IHP) and 504 Plan.</li> <li>Develop Individual Health Plan (IHP) for students who require emergency medication (EAI or antihistamine) for allergy exposure.</li> <li>Send notice of eligibility for 504 plan and Notice of Rights to parent/guardian.</li> </ol>



- 3. Develop 504 plan for students whose parents request this plan.
  - 4. Review and modify IHP and 504 plan as needed.
  - 5. Summarize progress towards goals / education on IHP form regularly, and at least annually, or upon student's withdrawal from school.

**III. EMERGENCY CARE**—Provision of Emergency Medication, calling 911, and connecting to healthcare provider for urgent care and follow up AND actions to prevent or manage emergency situations.

#### **Emergency Care**

 Administer medications per RN delegation and Anaphylaxis Action Plan when indicated (as appropriate per state nurse practice act)

# **Emergency Care and Planning**

- Collaborate with building administrator to determine staff who will be designated to provide epinephrine.
- 2. Collaborate with building administrator to determine anaphylaxis training dates for all staff.
- Collaborate with parent/guardian and building administrator to determine where emergency medication (EAI and/or anti-histamine) and other supplies will be located.
- 4. Train and document all designated staff in identification of anaphylaxis, the student's individualized Anaphylaxis Action Plan and administration of emergency medication (EAI and/or anti-histamine).
- 5. Implement Anaphylaxis Action Plan / Emergency Care Plan when indicated.
- 6. If student self-carrying Epi-pen, complete self-carry agreement and review use of Epi-pen with student.

# Student Health Record

- Document all 911 calls in student health record.
   Call health services administrator to report 911 call.
- 2. Document Anaphylaxis Action Plan in student's health record when emergency medication (EAI and/or anti-histamine) is administered.
- 3. Document other pertinent information in nursing notes.



- 4. Hold a debrief session for all school personnel to evaluate emergency response per Anaphylaxis Action Plan.
- At end of year or upon student withdrawal, file Allergy Health History, IHP, Anaphylaxis Action Plan, and self carry form in the student's cumulative education record.

#### IV. STUDENT COUNSELING/EDUCATION—

- BUILD STUDENTS' ALLERGY KNOWLEDGE, BEHAVIOR AND POSITIVE ATTITUDE ABOUT THEIR ROLE IN ANAPHYLAXIS PREVENTION AND ALLERGY SELF-MANAGEMENT.
- EDUCATION, INFORMATION AND MATERIALS TO PARENTS, TEACHERS, STAFF AND COACHES TO SUPPORT ANAPHYLAXIS MANAGEMENT OF STUDENTS.

### **Group Education**

- 1. Review general information on allergies and anaphylaxis at a faculty or grade level meeting.
- 2. Provide written signs and symptoms in lay language for faculty as needed.

#### **Individual Education**

- 1. Review with student allergy trigger identification and avoidance measures.
- 2. Review Anaphylaxis Action Plan with student.
- 3. If student is self-administering EAI, review medication administration technique.
- 4. Provide counseling and educate students, families and school staff on key components of anaphylaxis management.
- 5. Document education of student, families and staff on *IHP*.
- Encourage students to be assertive self-advocates. Encourage students to inform subs, coaches, and other before and after school staff of their allergies.

(Adapted from Minneapolis Special School District #1 (2009). *Components of Anaphylaxis/Allergy Management in School*, Healthy Learner Model for Student Chronic Condition Management)