



**Tri-County**

Regional Centre for Education

**TRI-COUNTY REGIONAL CENTRE FOR EDUCATION  
POLICY and PROCEDURES**

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It is the policy of the Tri-County Regional Centre for Education that the **Procedural Handbook for Managing Life Threatening Allergies**, attached hereto, be used throughout the Region.

**PROCEDURE** under Policy No **743**

*Approved by the Tri-County Regional Centre for Education – February 22, 2000*



**TRI-COUNTY REGIONAL CENTRE FOR EDUCATION**

# **Procedural Handbook for**

*Managing Life*

# **Threatening Allergies**

**Amended by the Tri-County Regional Centre for Education on February 22, 2000**

## INTRODUCTION

As many as one percent of Canadians suffer from an extreme life-threatening allergy to certain foods, medications, or insect stings. For these people, exposure to even a minute amount of the substance to which they are allergic (allergen) can trigger anaphylactic shock.

Anaphylactic shock is an allergic reaction in all the major body-organ systems. Immediate medical intervention is necessary as the victim may suffer a drop in blood pressure, loss of consciousness, and death. This can occur at any time up to four hours following exposure to the triggering substance. Even a small amount of the allergen can be fatal.

Although peanuts and peanut products are the most common foods that cause anaphylactic shock, shellfish, fish, eggs, sulfite, milk, other foods, drugs, insect bites, or environmental conditions can cause this dangerous reaction. Each subsequent exposure to the allergen can increase the severity of the reaction.

The emergency response to this condition is the administration of adrenaline (epinephrine) by syringe, usually with an Epi-Pen. The adrenaline (epinephrine) can be safely administered with this device by non-medical personnel with minimal training.

The information and direction provided in the Handbook is intended to provide guidelines to school personnel for the management of students who are at risk of anaphylactic shock.

## DEFINITION OF ANAPHYLACTIC SHOCK

Anaphylactic shock is an allergic reaction which may be fatal, and it occurs when an allergic individual is exposed to a particular material such as peanut products, nuts, eggs, fish, insect stings such as a bee, hornet or wasp, or is given medication such as penicillin or aspirin.

## SYMPTOMS OF ANAPHYLACTIC SHOCK

In the case of a student who has known allergies and who is exposed to a particular material, the occurrence of any of the following symptoms may indicate anaphylactic shock:

- The child will give verbal indication;
- Itchiness and hives over the entire body;
- Nausea, vomiting, diarrhea;
- Fainting and collapse;
- Swelling of the tongue, lips or face;
- Difficulty breathing;
- Rapid heartbeat;
- Seizures.

Immediate administration of the Epi-Pen is required in these instances.

## **PREVENTION AND MANAGEMENT PROCEDURES**

when a child who is subject to extreme allergic reactions is identified, the principal will convene, as soon as possible, a meeting of the parent and appropriate school staff to develop a procedure to enhance the safety of the child. The following elements will be addressed in the plan.

### **A. Prevention**

A prevention plan to minimize the student's exposure to the triggering material should be developed. The prevention plan should be appropriate to the maturity and reliability of the student and the severity of the problem. Prevention measures may include the following:

- Self-supervision;
- Education programs for classmates, schoolmates, parents;
- Request to parents of students in classroom to assist in management of exposure to the allergen; and
- Minimizing the presence of triggering material in school and school-related activities

In some jurisdictions, school personnel have attempted to ban food products which cause anaphylactic shock. However, it is impossible to guarantee the implementation of a complete ban. In fact, the adoption of this policy could lead to the assumption that a school is free of a particular allergen and create a false sense of security. The most practical options are to minimize exposure to the particular food products, and plan for the management and care of the allergic student. By way of prevention, the school should arrange the most practical approach to ensuring the least possible chance of exposure. This may involve the consideration of options such as having the allergic child eat in an allergen-free area or having the parent present at lunch time. In addition, the principal could take steps to seek cooperation from parents in order to reduce the presence of particular foods within the school.

### **B. Epi-Pen**

Epi-Pens supplied by parents must be available, and all staff who may be required to administer medication must be trained to do so. A mechanism by which all staff can identify the students at risk should be available. Provision should be made for informing substitute teachers and other temporary staff about the student and their potential responsibilities.

The number of locations at which Epi-Pens are kept should be determined, based upon the severity of the problem as mutually determined by the parent, principal, and identified resource person (such as Public Health nurse, Lung Association representative, or allergy clinic personnel, etc.) Instructions for managing an emergency, and a recent photo of the student, should also be posted where each Epi-Pen is located. The preferred approach would be for the student to carry the Epi-Pen at all times, with a minimum of two spare Epi-Pens available in school locations. For students at risk of anaphylactic shock, there must be at the school an Epi-Pen or auto-injector for administration at the time of anaphylactic shock, as well as a minimum of three auto-injectors to assure re-administration every ten or fifteen minutes while waiting for an ambulance and enroute to the hospital.



The regular Epi-Pen is used for persons who weigh over thirty-three (33) pounds. In situations where it is uncertain anaphylactic shock is occurring, it is advisable to administer the Epi-Pen, given that the medication can be safely administered in these circumstances.

## **PREVENTION AND MANAGEMENT PROCEDURES (CONTINUED)**

### **C. Emergency Action**

As in the case of any potential crisis, advance planning will be helpful in successfully managing the event. In dealing with cases of anaphylactic shock, the emergency action is as follows:

- Get Epi-Pen and lay student down;
- Administer Epi-Pen immediately;
- Have someone call an ambulance or take the individual to the Local Emergency Care center if the estimated time of arrival of the ambulance is longer than ten (10) minutes; a minimum of two (2) adults must accompany the casualty;
- Have someone call the parent;
- Cover and reassure student;
- Tilt head back, elevate legs;
- If the ambulance has not arrived in 10-15 minutes, and breathing difficulties are present, administer a second Epi-Pen;
- Even if symptoms subside, take student to hospital immediately.

Additionally, there will be a need to develop plans to deal with such an emergency if the student is involved in school activities outside the school.

## **RESPONSIBILITIES**

The management of students who have severe allergies requires a clear understanding of the roles of the parent and school and health personnel. These responsibilities are described in the following sections.

### **A Parents**

Parents are required to assume a number of responsibilities. It is important that parents provide certain information to the principal and the public health nurse at the time that the student is registered to attend school. Necessary forms and authorizations should be completed. In addition, parents may be called upon to provide support, for example, on field trips.

Parents have specific responsibilities for providing:

- the school principal with information about the student's allergy;
- indicators of child's reaction to allergen;
- a completed copy of the Student Allergy Survey;



**RESPONSIBILITIES (continued)**

- assistance to the principal in preparing the Extreme Allergy Management and Prevention Plan, and authorization and consent to carry out emergency procedures;
- a recent photo of the student;
- the student with a Medic Alert bracelet;
- the student with an Epi-Pen and a carrying pouch for the transport of an Epi-Pen.

**B Public Health Nurse**

Proper planning for the management of students with severe allergies requires support from health care workers.

The specific responsibilities of the public health nurse are to:

- become aware of students who have severe allergies;
- develop education programs in conjunction with appropriate partners;
- be a resource for the training of school staff who may be required to administer the
- Epi-Pen (epinephrine);
- act as a resource to the school principal and the parent with the development of the Extreme Allergy Management and Prevention Plan for each identified student.

**C Principal**

The school principal shall ensure the Student Allergy Survey is completed when students register to attend school or transfer from one school to another. The school principal is responsible for planning and co-ordination with regard to the management of students who have severe allergies. Upon being informed that a student has a serious allergy, the principal shall:

- develop, in consultation with the identified resource person and the student's parent, a plan for management of the student through the completion of the Extreme Allergy Management and Prevention Plan;
- ensure that staff are trained and available to provide emergency procedures and provide them with a copy of the Extreme Allergy Management and Prevention Plan and a copy of the Emergency Allergy Alert Form, and a record is kept of dates of staff training;
- notify the school staff, cafeteria staff, bus drivers, janitors and substitute personnel about the student and the student's allergies;
- post in the staff room, classroom, school office or other appropriate location, a copy of the Emergency Allergy Alert Form, along with a recent photo of the student, and locate an Epi-Pen with the form;
- arrange for the identified resource person to conduct information and training sessions for the appropriate school staff including the bus driver;
- consult, as appropriate, with the school council and parents concerning education and prevention plans for the school;
- ensure the Extreme Allergy Management Plan is reviewed annually and appropriate changes are made to the Plan and to the Emergency Allergy Alert Form;



- obtain two (2) Epi-Pens from the student's caregiver; check for expiry date and obtain replacement Epi-Pens, when required, from the student's caregiver.

### **STUDENT ALLERGY SURVEY**

All parents should be required to complete the Student Allergy Survey at the time a student is registered to attend a school, or transfers to another school, and then annually thereafter. Also, the Student Allergy Survey may be used for periodic surveys of an entire school population.

### **STUDENT ALLERGY SURVEY (CONTINUED)**

In instances where students are identified to have a severe allergy, the Extreme Allergy Management and Prevention Plan should be completed. A copy of the Student Allergy Survey is included in **Appendix I**.

### **EXTREME ALLERGY MANAGEMENT AND PREVENTION PLAN**

The Extreme Allergy Management and Prevention Plan is to be completed for each student who is at risk of anaphylactic shock. The Plan requires the provision of information from the parent. It also provides for the documentation of commitments by the school and parent. Finally, the Plan requires the parent to give authorization for the school staff to administer medication and obtain medical assistance. A completed copy of the Plan should be provided to the student's teacher, bus driver and other appropriate staff. A copy of the Extreme Allergy Management and Prevention Plan is included in **Appendix II**.

### **EMERGENCY ALLERGY ALERT FORM**

The Emergency Allergy Alert Form is to be completed by the parent and the principal. The Form includes sections for recording information about the student's allergy. The Form also contains a description of the symptoms of anaphylactic shock and the action which is appropriate in an emergency. A photo of the student should be attached to the Form. A completed copy of the Emergency Allergy Alert Form should be posted in the staff room, school office, classroom and other appropriate locations within the school. At least one Epi-Pen should be located in the school office. A copy of the Emergency Allergy Alert Form should be provided to the student's teacher, bus driver and other appropriate staff. A copy of the Emergency Allergy Alert Form is included in **Appendix III**.

### **SCHOOL LUNCH IDEAS**

School Lunch Ideas contains suggestions for school lunches which do not include peanut butter. It will be necessary to develop a different list of ideas in cases where a student is allergic to any of the foods included in the list. In these instances, consultation with a nutritionist is desirable. This information could be provided to parents through school newsletters, at parent meetings, or attached to correspondence to parents concerning the presence of a child who is at risk of anaphylactic shock. See **Appendix IV**.



### **CONSULTATION WITH PARENTS**

The creation of classroom spaces which are free from the substance which could place an allergic student at risk of anaphylactic shock is more likely to be achieved through the use of a consultative process. Efforts should be made to provide parents with information about the risks. A sample letter to parents is included in **Appendix V**. This letter is designed to inform parents about the presence of a student who is at risk of anaphylactic shock following exposure to peanuts and peanut products. The letter can be modified for cases where students are at risk of anaphylactic shock following exposure to other substances. An invitation to a school meeting is included in the sample letter. Of course, the letter should be adapted to meet the particular circumstances.



**APPENDIX I**  
**STUDENT ALLERGY SURVEY**

**TO PARENTS:**

This survey is designed to obtain information concerning life-threatening allergies. Please return the completed survey to your student's school.

\_\_\_\_\_  
Student's Name

\_\_\_\_\_  
Parent's Name

- 1 Does your child have a life-threatening allergy? YES\_\_\_ NO\_\_\_
2. Does your child have any allergies which produce any of the following symptoms following exposure to a particular material?
- Difficulty breathing or swallowing YES\_\_\_NO\_\_\_
  - Fainting or collapse. YES\_\_\_NO\_\_\_
  - Swelling of the tongue, lips or face. YES\_\_\_NO\_\_\_
  - Other (specify) YES\_\_\_NO\_\_\_ \_\_\_\_\_
3. Have any of the symptoms referred to in Question 2 above occurred after
- Eating a particular food? YES\_\_\_NO\_\_\_
  - Receiving an insect bite? YES\_\_\_NO\_\_\_
  - Receiving a sting? YES\_\_\_NO\_\_\_

***IF YOU RESPONDED YES TO ANY OF THE ABOVE QUESTIONS, PLEASE CONTINUE.***

4. Has your child been seen by a medical doctor for treatment of an allergic reaction? YES\_\_\_NO\_\_\_
5. Has your child been tested for allergies? YES\_\_\_NO\_\_\_  
If yes, indicate types of tests and results.  
\_\_\_\_\_
6. Have you been told by your medical doctor that your child requires the availability of an emergency medical kit in the school? YES\_\_\_NO\_\_\_
7. What foods or materials must your child avoid? \_\_\_\_\_  
\_\_\_\_\_
8. Name and telephone number of family doctor: \_\_\_\_\_ Tel.# \_\_\_\_\_

I agree this information will be shared, as necessary, with the staff of the school and health care systems.

Signature of Parent: \_\_\_\_\_ Date: \_\_\_\_\_

**ATTENTION PRINCIPAL:** If a YES response is given to any question, please forward the Survey to the Public Health Nurse.



**APPENDIX 11**  
**EXTREME ALLERGY MANAGEMENT AND PREVENTION PLAN**

**Student Information:** (to be completed by parent/guardian)

Student's Name:

\_\_\_\_\_

Date of Birth: \_\_\_\_\_ Medic Alert I.D. \_\_\_\_\_

Health Card Number: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Parent(s)/Guardian(s) name and address: \_\_\_\_\_

Telephone Numbers: Home: \_\_\_\_\_ Work: \_\_\_\_\_

Cell: \_\_\_\_\_ Emergency: \_\_\_\_\_

Name of family physician: \_\_\_\_\_ Phone No. \_\_\_\_\_

Allergy Information (to be completed by parent)

Nature of allergy: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Symptoms or reaction: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Recommended response to a reaction : \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Medication: \_\_\_\_\_ Dosage: \_\_\_\_\_

Additional instructions or information: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**APPENDIX 11 (cont'd)**  
**EXTREME ALLERGY MANAGEMENT AND PREVENTION PLAN (cont'd) (Page 2 of 3)**

School/Parent Commitments

The completion of the following section is to be coordinated by the Principal

School Commitments:

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Parent commitments

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Other

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Signature of Principal

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Date

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Signature of Parent

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Date

**APPENDIX 11 (cont'd)**

**EXTREME ALLERGY MANAGEMENT AND PREVENTION PLAN** (cont'd) (Page 3 of 3)

**PARENT AGREEMENT**

I, \_\_\_\_\_, acknowledge and understand my participation in the development of the preceding Extreme Allergy Management and Prevention Plan and the Emergency Allergy Alert Form, and I agree to execute reliably the parent commitments. I hereby request and give my consent for staff or personnel of \_\_\_\_\_ School and the public health nurse to execute the commitments as outlines within the plan.

In the event of an emergency, I authorize the school staff to administer the designated medication and obtain suitable medical assistance. I agree to assume responsibility for all costs associated with medical treatment, and I release the Tri-County Regional Centre for Education, its employees, agents, volunteers, and public health nurses, from any liability for loss, damage or injury, howsoever caused, to