

CHICO COUNTRY DAY SCHOOL
102 W.11TH ST
CHICO, CA 95973
(530)514-2314

Anaphylaxis Treatment Procedure/Protocols

To be used only for persons without individual physician written orders.

DEFINITION: Anaphylaxis is a sudden, severe, potentially fatal, systemic allergic reaction that can involve various areas of the body (such as the skin, respiratory tract, gastrointestinal tract, and the cardiovascular system). Onset may be sudden (generally within minutes to two hours after contact with the allergy-causing substance, but may occur up to four hours after contact). Allergic reactions may be mild to life threatening. While anyone may experience anaphylaxis, individuals with asthma, eczema, or hay fever are at greater relative risk. Patients with asthma are those most at risk for life-threatening anaphylaxis events.

Severe, even fatal reactions can occur in previously unidentified individuals.

RECOMMENDATIONS:

- It is recommended that at least two (2) epinephrine auto-injectors be available on the middle school campus and two (2) epinephrine auto-injectors be available on the elementary school campus for anaphylaxis emergencies.
- All epinephrine auto-injectors should be stored according to manufacturer’s directions to maintain effectiveness and in a **clearly labeled, easily accessible cabinet.**
- An-epinephrine auto-injector should be considered for first aid kits for field trips and/or school events **ONLY IF TRAINED STAFF** are available and willing to administer the medication.
- Expiration dates on epinephrine auto-injector should be monitored and documented on an appropriate log maintained by the school nurse. The shelf-life of an epinephrine auto-injector is approximately one to one and a half years. The fluid should be clear and colorless. Discard if the fluid has turned brown or is cloudy.
- All individuals receiving emergency epinephrine **WILL** have 911 summoned immediately even if symptoms appear to have resolved.
- This protocol will not supersede a physician’s written order for individual students
- In accordance with SB 1266 Chico Country Day School will:
 - 1- Distribute a notice at least once a year to all school staff to request volunteers to be trained to administer Epinephrine as well as a description of the training.
 - 2- Document any use of Epinephrine Auto-injectors within 24 hours and notify school nurse, supervising physician and school administration.
 - 3- School nurse will obtain a prescription from supervising physician and re-stock Epinephrine within 72 hours of use.
 - 4- Chico Country Day School will ensure that each employee who volunteers will be provided defense and indemnification for any and all civil liabilities.

PERSONNEL:

- The school nurse (or other qualified supervisor of health, *Education Code* sections 44871-44878) assigns, monitors, and supervises the annual training of unlicensed personnel in the administration of epinephrine auto-injectors for allergic, life threatening emergencies.
- All designated staff who are trained to administer the epinephrine auto-injectors **MUST** have current cardiopulmonary resuscitation (CPR) certification (per ed code 49417).
- Designated and trained school personnel serve under the direct or indirect supervision of the credentialed school nurse (or other qualified supervisor of health).

COMMON CAUSES:

Food
Insect stings
Medication
Latex

LESS COMMON CAUSES:

Food-dependent exercise-induced anaphylaxis - rare, occurs when an individual eats a specific food and exercises within three to four hours after eating.
Idiopathic anaphylaxis - unknown cause

ANAPHYLACTIC SYMPTOMS (Sudden onset or progression over a few hours)	
May include any or many of the following:	
<ul style="list-style-type: none"> ● Tingling sensation, itching, or metallic taste in mouth. ● Hives or generalized flushing, itching, or redness of the skin. ● Nasal congestion, cough or wheezing (asthma-like symptoms). ● Swelling of the throat, lips, tongue, and around the eyes. ● Feeling of apprehension, agitation, sweating, weakness or shock. ● Abdominal cramping, nausea, vomiting, or diarrhea. ● Drop in blood pressure and paleness. ● Throbbing heart beat/throbbing in ears/dizziness/headache. ● Throat tightness/change of voice. 	<p>If any of the following symptoms occur, administer EPINEPHRINE AUTO-INJECTOR IMMEDIATELY & CALL 911</p> <p>*Difficulty Breathing or wheezing</p> <p>*Difficulty Swallowing, swelling of the throat, throat tightness, or voice changes</p> <p>*Fainting or Loss of Consciousness, shock, or drop in blood pressure</p> <p>*Convulsions</p>

MANAGEMENT OF ANAPHYLAXIS

ESSENTIAL STEPS	KEY POINTS AND PRECAUTIONS
1. Determine if anaphylaxis has occurred. (If suspected, treat as anaphylaxis.)	1. Anaphylaxis usually occurs right after insect sting, injection of medication, or ingestion of foods, such as peanuts, nuts, fish, eggs or milk. (Any food could potentially cause a reaction.)
2. If anaphylaxis symptoms occur. GET epinephrine auto-injector. SECONDS COUNT! Direct someone to activate the emergency medical system (EMS) 911.	2. Stay with the victim. Get or direct someone to get epinephrine auto injector. a. Have others notify EMS, school nurse, parents, and school administrator immediately.
3. Have the victim sit down. Calm and reassure the victim.	3. Avoid moving the victim. Calming reduces the distribution of the allergen in the body.
4. Prepare to administer the epinephrine auto-injector Under 55 lbs, use 0.15 mg Over 55 lbs, use 0.3 mg	4. The epinephrine auto-injector acts immediately, so do not delay in administering it. <i>Make sure 911 has been called.</i>
5. Epinephrine auto-injector Administration Procedure: a. Pull off the Safety Cap b. Firmly push the OUTER THIGH c. You will feel or hear a sound. d. Hold in place for 5-10 seconds, then remove. e. Call 911, if not previously called.	5. The epinephrine auto-injector can be injected through the clothing. If removing the clothing is not possible or will significantly delay the treatment. After receiving epinephrine, the victim may feel his/her heart pounding. This is a normal reaction to the medication.
6. NOTE: If the anaphylactic reaction is due to an insect sting, remove the stinger ASAP <u>after administering the epinephrine auto-injector</u> . a. Apply an ice pack to the sting area.	6.. Remove the stinger quickly by scraping with a fingernail or plastic card. a. Do NOT push, pinch, or squeeze, or further imbed the stinger into the skin. This may cause more venom to be injected into the victim.
7. Monitor airway and breathing. Observe for signs of shock.	7. If breathing stops-begin CPR IMMEDIATELY. a. Maintain the victim's body temperature. Cover the victim with a blanket, if needed.
8. Have someone make copy of emergency card for paramedics. . Give expended epinephrine auto-injector to paramedics.	8. When paramedics arrive, give a factual report about the incident, including the time the epinephrine auto-injector was administered.
9. If symptoms continue or reoccur and the paramedics do not arrive, re-inject the victim (with a new epinephrine auto-injector) 5-15 minutes after the initial injection.	9. Continue to monitor the airway and the victim's breathing.
10. Follow-up medical care should be obtained immediately in an emergency room.	10. A second delayed (bi-phasic) reaction may occur up to six hours after the initial anaphylaxis.
11. Document the incident, date and time the epinephrine auto-injector was administered, the victim's response, and additional pertinent information.	11. Complete any appropriate paper work. Make sure school nurse is notified, if not present.

FOLLOW-UP

1. Refer ALL anaphylaxis cases to the victim's physician.
2. Recommend that the parents discuss with physician about avoiding triggers and prescribing an epinephrine auto-injector.
3. Complete the required documentation.

Standing Anaphylaxis Treatment Procedure Approvals

SIGNATURES*	NAMES (print or type)
Physician:	
X	Date
School Nurse/Supervisor of Health:	
X	Date
Administrator	
X	Date

