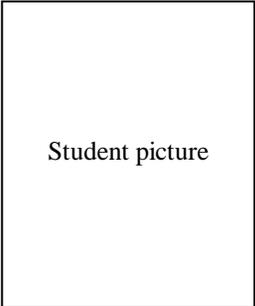




NORTHWEST ASTHMA & ALLERGY FOOD ALLERGY EMERGENCY PLAN



Student: _____ Birth Date: _____ Grade: _____

Allergy to: _____

Does this student also have Asthma? No Yes (higher risk for severe reaction)

Student picture

Extremely reactive to the following foods: _____

THEREFORE:

- If checked, give epinephrine immediately for ANY symptoms if the allergen was *likely* eaten
- If checked, give epinephrine immediately if the allergen was *definitely* eaten, even if no symptoms are noted

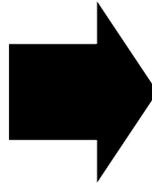
Any SEVERE SYMPTOMS after suspected or known ingestion

One or more of the following

- Lung: Short of breath, wheeze, repetitive cough
- Heart: Pale, blue, faint, weak pulse, dizzy, confused
- Throat: Tight, hoarse, trouble breathing/swallowing
- Mouth: Obstructive swelling (tongue and/or lips)
- Skin: Many hives over body

Or combination of symptoms from different body areas:

- Skin: Hives, itchy rashes, swelling (e.g. eyes, lips)
- Gut: Vomiting, diarrhea, abdominal cramping/pain



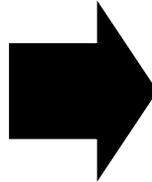
1. INJECT EPINEPHRINE IMMEDIATELY

*2ND dose can be repeated in ≥ 5 minutes or more if symptoms not improving or worsening

2. Call 911
 3. Begin monitoring (see box below)
 4. Give additional medications:
 - Antihistamine
 - Inhaler (bronchodilator) if Asthma
- **Antihistamines & inhalers are not to be depended upon to treat a severe reaction (anaphylaxis) - **USE EPINEPHRINE.**

Mild Symptoms ONLY

- Mouth: Itchy mouth
- Skin: A few hives around mouth/face, mild itch
- Gut: Mild nausea/discomfort



1. GIVE ANTIHISTAMINE

2. Stay with student; alert healthcare professionals and parent
3. If symptoms progress (see above), **USE EPINEPHRINE**
4. Begin monitoring (see box below)

Medications/Doses:

Epinephrine: Epinephrine Jr. 0.15mg Epinephrine 0.3mg

Antihistamines: Benadryl/Diphenhydramine 12.5mg/5ml _____ tsp(s) or 25mg _____ tab(s)

OR: _____

(*Liquid antihistamine would be preferable over tablets IF AVAILABLE)

Other: (e.g. inhaler/bronchodilator if asthmatic): Albuterol/Xopenex 2 puffs or _____

MONITORING: Stay with student. Alert healthcare professionals and parents

- Tell rescue squad epinephrine was given; request an ambulance with epinephrine.
- Note time when epinephrine was administered. _____
- A second dose can be given ≥ 5 minutes if symptoms are not improving or worsening.
- For a severe reaction, consider keeping student lying on back with legs raised.
- Treat student even if parents cannot be reached. See back/attached for auto-injection technique.

The severity of the reaction can change quickly. Past reactions do not predict future reactions.

This student may self-carry this emergency medication at school. Yes No

This student is trained and capable to self administer emergency medications. Yes No

HCP Signature

HCP printed name

Date

Medication order is valid for duration of current school year including summer school

| | | | |
|---------------------------|---|------------------------------|-----------------------------|
| Parent section | I request that the school nurse, or designated staff member, administer the above medications in accordance with healthcare provider instructions | | |
| | I give my permission for the medication information to be shared with school staff on a "need to know" basis | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| | I give permission for my child to carry this emergency medication | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| | I give permission for my child to self-administer this emergency medication | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Parent/Guardian signature | Date | Home phone | Emergency phone |

EMERGENCY CONTACT INFORMATION

Mother _____ Home _____ Cell _____

Father _____ Home _____ Cell _____

Primary Care MD _____ Office _____

Allergy MD _____ Northwest Asthma & Allergy Center _____ Office 1- 206-527-1200

Other Emergency Contacts:

Name _____ Phone _____

Name _____ Phone _____

EpiPen and EpiPen Jr Auto-Injector 3-Step Easy To Follow Instructions:



EpiPen Auto-Injector (yellow label)
in Carrier Tube



EpiPen Jr Auto-Injector (green label)
in Carrier Tube



EpiPen Auto-Injector (yellow label)
removed from Carrier Tube



EpiPen Jr Auto-Injector (green label)
removed from Carrier Tube

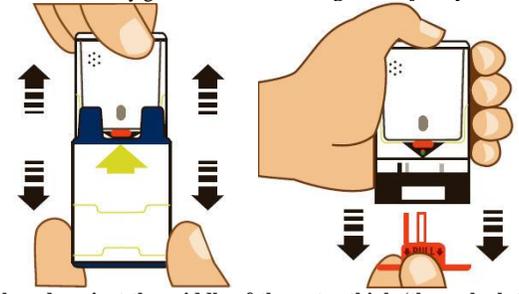
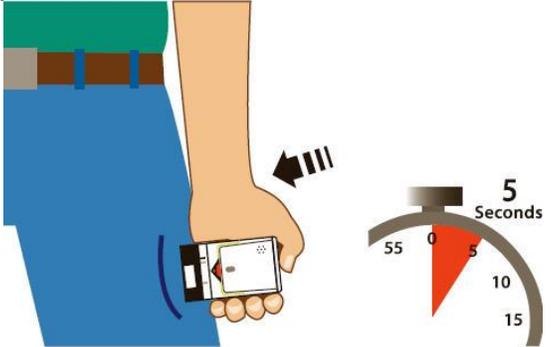
- Prepare the EpiPen or EpiPen Jr Auto-Injector For Injection**
 - Remove the auto-injector from the clear carrier tube.
 - Flip open the yellow cap of your EpiPen or the green cap of your EpiPen Jr Auto-Injector carrier tube.**
 - Tip and slide the auto-injector out of the carrier tube.**
 - Grasp the auto-injector in your fist with the orange tip pointing downward.
 - With your other hand**, remove the blue safety release by pulling straight up without bending or twisting it.
- Administer the EpiPen or EpiPen Jr Auto-Injector**
 - Hold the auto-injector with orange tip near the outer thigh.**
 - Swing and firmly push the orange tip against the outer thigh until it 'clicks'. **Keep the auto-injector firmly pushed against the thigh at a 90° angle (perpendicular) to the thigh.**
 - Hold firmly against the thigh for approximately **10 seconds** to deliver the drug. The injection is now complete.



- Finalize the Injection Process**
 - Remove the auto-injector from the thigh. The orange tip will extend to cover the needle.
 - Massage the injection area for 10 seconds.

Get emergency medical help right away. You may need further medical attention. You may need a second EpiPen or EpiPen Jr Auto-Injector should symptoms persist or recur.

How to use Auvi-Q™

- Pull Auvi-Q™ from the outer case**
 - Do **not** proceed to step 2 until you are ready to use Auvi-Q™. If not ready to use, replace the outer case.
- Pull off the Red safety guard**
 - To avoid an accidental injection, **never** touch the black base of the auto-injector. If an accidental injection does occur, seek medical help immediately.
 - NOTE: The safety guard is meant to be tight. **Pull firmly to remove.**
- Place black end against the middle of the outer thigh (through clothing, if necessary), then press firmly and hold in place for 5 seconds. Each device is a single-use injection.**
 - Only** inject into the middle of the outer thigh (upper leg). Do not inject into any other location. **Note: Auvi-Q™ makes a distinct sound (click and hiss) when activated. This is normal and indicates Auvi-Q™ is working correctly. Do not pull Auvi-Q™ away from your leg when you hear the click and hiss sound.**
- Seek medical attention immediately**
 - Replace the outer case and take your used Auvi-Q™ with you to a healthcare professional for proper disposal and a prescription refill.