Klamath County N School District

Severe Allergic Reaction Emergency School Plan

Name:	DOB:	School:

Health Care Provider Please Fill out the Following:					
SEVERE ALLERGIC REACTION TO THE FOLLOWING: Check Below: [] Give epinephrine immediately if the allergen was de [] Give epinephrine immediately for ANY symptom if t	efinitely eaten, even if no symptoms are noted. the allergen was likely eaten.				
[] Give epinephrine immediately if stung by/exposed to allergen. MEDICATIONS/DOSES: Epinephrine Brand: Epinephrine Dose: [] 0.15mg [] 0.3mg Antihistamine Brand: Antihistamine Dose:					
Do not depend on antihistamine or inhaler to trea: [] student has permission to self-carry/administer epi [] student is not ready to self-medicate at school.	t a severe reaction: USE EPINEPHRINE!				
Physician/HCP (print name) Physician/ HCP authorization signature Date					
SEVERE SYMPTOMS INJECT EPINEPHRINE IMMEDIATELY FOR ANY OF THE FOLLOWING:	Nose Mouth Skin Stomach Itchy Itching Few Hives Nausea Runny Mild Itching Discomfort				



Lungs

Shortness of breath Wheezing Repetitive cough

Heart

Pale/Blue skin Faint/weak pulse Dizziness

Throat

Tightness Hoarseness Trouble breathing Trouble swallowing

Mouth

Swelling of tongue Swelling of lips



All over body hives Widespread redness



Stomach

Repetitive vomitting Severe Diarrhea Severe stomach pain



Other

Anxiety Confusion Sense of doom



of symptoms from different body areas



- 1. INJECT EPINEPHRINE IMMEDIATELY.
- 2. CALL 911. Tell dispatcher the person is having anaphylaxis.
- Consider giving additional medications after epinephrine:
 - Antihistamine
 - Inhaler if wheezing
- Lay the person flat, raise legs and keep warm. If vomitting, let them sit up or lie on their side.
- If symptoms do not improve or worsen after 5 minutes, administer second epinephrine if available.
- EMS to transport student to ER, unless parent is on site and chooses to transport student themselves.



For MILD SYMPTOMS from a SINGLE **SYSTEM,** follow the directions below:

- 1. Antihistamine may be given if ordered by health care provider.
- 2. Stay with the person; alert emergency contacts.

FOR 2 OR MORE MILD SYMPTOMS, OR IF SYMPTOMS ARE WORSENING, **GIVE EPINEPHRINE**

District RN	Signature	