



Anaphylaxis Emergency Plan

Participant Name: _____

This Person has a potentially life-threatening allergy (anaphylaxis) to:

Check the appropriate box(es):

- | | |
|---------------------------------------|--|
| <input type="checkbox"/> Peanut | <input type="checkbox"/> Tree Nuts |
| <input type="checkbox"/> Egg | <input type="checkbox"/> Milk |
| <input type="checkbox"/> Insect Sting | <input type="checkbox"/> Medication: _____ |
| <input type="checkbox"/> Latex | <input type="checkbox"/> Other: _____ |

Food: The key to preventing an anaphylactic emergency is absolute avoidance of the allergen. People with food allergies should not share food or eat unmarked/bulk foods or products with a 'may contain' warning.

Previous anaphylactic reaction: Mild Moderate Severe

Epinephrine Auto-Injector: Expiry Date: _____

Dosage: EpiPen Jr 0.15 mg EpiPen 0.30 mg

Location & number of Auto-Injector(s) on hand: _____

- or student will carry & Administer his/her own medication
- Asthmatic:** Person is at greater risk. If person is having a reaction and has difficulty breathing, give epinephrine auto-injector before asthma medication.

A person having an anaphylactic reaction might have ANY of these signs and symptoms:

- **Skin:** hives, swelling, itching, warmth, redness, rash.
- **Respiratory (breathing):** wheezing, shortness of breath, throat tightness, cough, hoarse voice, chest pain/tightness, nasal congestion or hay fever-like symptoms (runny itchy nose and watery eyes, sneezing), trouble swallowing.
- **Gastrointestinal (stomach):** nausea, pain/cramps, vomiting, diarrhea.
- **Cardiovascular (heart):** pale/blue colour, weak pulse, passing out, dizzy/lightheaded, shock.
- **Other:** anxiety, feeling of 'impending doom', headache.

Early recognition of symptoms and immediate treatment could save a person's life.

Act quickly. The first signs of a reaction can be mild, but symptoms can get worse very quickly.

1. Give epinephrine auto-injector (e.g. EpiPen[®] or Twinject[®]) at the first sign of a reaction occurring in conjunction with a known

or suspected contact with allergen. Give a second dose in 5 to 10 minutes or sooner IF the reaction continues or worsens.

2. Call 911. Tell them someone is having a life-threatening allergic reaction. Ask them to send an ambulance immediately.

3. Go to the nearest hospital, even if symptoms are mild or have stopped. Stay in the hospital for an appropriate period of

observation, generally 4 hours, but at the discretion of the ER physician. The reaction could return.

4. Call contact person. (see table below).

Emergency Contact Information:

Name	Relationship	Home Phone	Work Phone	Cell Phone

The undersigned parent or guardian authorizes any adult to administer epinephrine to the above-named person in the event of an anaphylactic reaction as described above. This protocol has been recommended by the patient's physician, and has been reviewed with the parent/guardian and child.

Parent/guardian Signature

Date