Middle School- Anaphylaxis Action Plan for

(Student's name)

Principal: Use this checklist and the Anaphylaxis Action Form* (AAF) to develop an Anaphylaxis Action Plan* (AAP) for the above-named student. Check the boxes when items are completed. This process needs to be completed annually. Indicate on the AAF the date for the next review.

 Inform school staff of school district Anaphylaxis policy and regulations and their responsibilities Notify the public health nurse of new students with a diagnosis of anaphylaxis. Contact parents prior to school starting in September Inform the parent of SD62 Anaphylaxis policy and regulations and intent to provide an "allergy a environment for students with life threatening allergies. Provide parents with an AAF* and Medication Administration Card. Inform parent(s) that only EpiPens will be administered in the event of an anaphylactic reaction oral antihistamines or Twinject) by school staff. Request parent(s) to provide two EpiPens. Meet with the parent(s), teacher(s) and public health nurse to review the AAF and complete an ABeview responsibilities of the parent(s), student, teacher(s), principal and public health nurse in developing and implementing the plan. Request parent(s) to ensure their child wears a Medic Alert bracelet or necklet. Provide parent(with a Medic Alert brochure and inform parent(s) of Medic Alert's "No Child Without" program. Check to see parent(s) have completed the AAF and that they have provided two EpiPens. Check to see the physician has signed the Medication Administration Card and has indicated the fepiPen to treat anaphylaxis. For students with food allergies, inform the parent(s) of the "Child in Classroom with Anaphylaxis letter" and request that the teacher send the letter home to other classroom parents informing the fa student in the class with anaphylaxis. Request parents' permission to use student's picture on the AAF. Obtain signatures from parent, student (optional), teacher and principal on the AAP. Provide a signed copy of the AAP to parent(s). Keep a copy of the AAF with the student's Permanent Student has a life-threatening health cond Provide a safe, unlocked,		
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control. The may include diacordanic, amos, stair room, landin toom and the darcteria.		Activate the student's computer record to indicate the student has a life-threatening health condition. Provide a safe, <u>unlocked</u> , centrally located storage area for the student's EpiPen. Ensure staff and public health nurse are aware of the location of EpiPen, Medication Administration Card, Medical Alert List and AAF. Designate school staff to be responsible for administering EpiPen in an emergency. Post the AAF in appropriate, confidential, staff locations. Provide a copy of the AAF to the teacher and involved school staff. Inform involved staff of their responsibilities for student safety in the classroom, on school grounds

□ Review the completed AAF and Medication Administration Card.

Request assistance from the Public Health Nurse to:

^{*}See Outlook: Public Folders/All Public Folders/Forms/Student Health

	Middle School- Anaphylaxis Action Plan for					
	(Student's name)					
	Review the EpiPens to ensure they are current. Provide anaphylaxis training and view EpiPen DVD for involved school staff as soon as possible each school year.					
	Review "allergy aware" classroom procedures with teacher. Assist with "allergy awareness" education of classmates. Provide Medic Alert brochures.					
Те	Teacher and Staff Responsibilities					
	Be aware of school district Anaphylaxis policy and regulations and your responsibilities for keeping students with anaphylactic allergies safe while at school and while participating in school-related activities.					
	Be familiar with students in your class with anaphylaxis. Be familiar with student's AAF, emergency treatment and location of EpiPens.					
	Inform teacher on-call of student with anaphylaxis, location of AAF, emergency treatment and location of EpiPens.					
	Create a positive and helpful attitude toward student with anaphylaxis. In consultation with parent(s)/student/public health nurse, provide students with age-appropriate "allergy awareness" education.					
	r student with food allergies: In consultation with the public health nurse, develop an "allergy aware" classroom.					
	Request parent(s) to consult with the teacher before bringing food into the classroom. Encourage students NOT share food, drinks or utensils. Encourage a non-isolating eating environment for the student with a food allergy (the student should					
	eat in the classroom with classmates). Encourage all students to eat their food on a napkin rather than directly on the desk or table. Encourage all students to wash their hands with soapy water before and after eating. Request students wash all desks with soapy water after eating. (Request all desks be washed with soapy water after students eat.) Do not use identified allergen(s) in classroom activities.					
On	field trips/co-curricular/extra-curricular activities:					
	Take a copy of the AAF. Take EpiPens or ensure the student has his/her EpiPens.					
	Take a cellular phone. Be aware of anaphylaxis exposure risk (food, latex and insect allergies).					
	Inform supervising adults of student with anaphylaxis and emergency treatment.					
Stu	udent Responsibilities					
	Inform your teachers, coaches, supervising adults and friends of your allergy, emergency treatment and location of your EpiPen.					
	Carry an EpiPen with you at all times. Re aware of risks for anaphylactic reactions and take responsibility to avoid them.					
	Be aware of risks for anaphylactic reactions and take responsibility to avoid them. Know the signs and symptoms of anaphylaxis.					
	Notify an adult if you are having an anaphylactic reaction.					
	Wear a Medic Alert bracelet or necklet at all times. Work with the Public Health Nurse to develop and provide "allergy awareness" education to your					

classmates.

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	If you have food allergies:					
	Eat only food and drinks broug	ht from home.				
	 Do not share utensils. 					
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ıre	nt Responsibilities					
	Inform school staff and classroom	•				
	•	er allergy and the signs and symptoms of a	an anaphylactic reaction			
	Inform your child of ways to avoid	• •				
	•	if he/she is having an anaphylactic reaction				
	Complete the AAF and return it to the principal. Set up a time to meet with designated school staff to develop the AAP.					
	•	complete the Medication Administration C	ard.			
		chool use: one to be kept with your child; the				
	kept in a central unlocked location at school.					
	If your child is unable to administer his/her EpiPen, in consultation with the teacher/principal,					
	determine where the EpiPen should be located.					
	Ensure your child knows where his/her EpiPens are kept.					
	Teach your child to administer his/her own EpiPen.					
	Ensure your child wears a Medic Alert bracelet or necklet.					
		teacher and public health nurse, determine	e your role in providing			
	"allergy awareness" education for a	h nurse if there is a change in your child's a	alleray condition or			
	treatment.	in thurse in there is a change in your child's	allergy condition of			
lf y	our child has a food allergy:					
	Ensure your child knows only to ea	at food and drinks from home.				
Ιg	ive permission for my child's pho	oto to be placed on the Anaphylaxis Acti	ion Form.			
	Parent/Guardian Name	Parent Guardian Signature	Date			
l h	ave read the Anaphylaxis Action	Plan				
• • •	avo roda ino Anaphylaxio Aotion					
Pa	rent/Guardian:	Date:				
Stı	udent (Optional):	Date:				
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See Outlook: Public Folders/All Public Folders/Forms/Student Health