



ST. MARY'S SPRINGS ACADEMY

Anaphylaxis and Epi-Pen® Administration Standard Protocol

In the event of an anaphylactic reaction and the person does not have their own prescribed Epi-Pen®, an "unassigned" Epi-Pen® may be administered by a staff member who has been adequately trained.

Definition: Anaphylaxis is a severe allergic reaction which can be life threatening. It may occur within minutes after a triggering event or up to hours later.

Common Triggers/Allergens (extreme sensitivity to one or more of the following):

1. Food-peanuts, tree nuts, soybeans, milk, fish, shellfish, eggs and wheat pollen
2. Insect sting, usually bee or wasp
3. Medication
4. Exercise
5. Asthma triggers
6. Latex

Signs of Anaphylaxis: Patient may experience hives, itching, and or vomiting.

Serious Signs and Symptoms:

1. Neurological- paleness, weakness, sweating, dizziness, mental confusion, fainting or loss of consciousness
2. Respiratory- difficulty breathing, talking or swallowing, tight chest, continuous cough, stridor (noisy breathing), wheezing
3. Skin- hives, flushing, swelling, itching, tingling sensation around the mouth or face
4. Gastrointestinal- nausea, abdominal cramps, vomiting and diarrhea
5. Eyes- itchy, watery, swelling around the eyes
6. Nose and mouth- sneezing, runny, swelling of tongue, and metallic taste

Procedure:

1. Confirm signs of anaphylaxis.
2. Administer Epi-Pen® or Epi-Pen Jr.® by removing the cap and pressing the tip firmly against the individuals' thigh and holding for 10 seconds. It is not necessary to remove clothing unless it is very thick.
3. Call 911 (EMS). Notify and inform them you have given an Epi-Pen® for anaphylaxis.
4. Maintain airway and monitor circulation and CPR as necessary, monitor for recurring anaphylaxis and possible need for a second dose of epinephrine.
5. Place the person in a recovery position (on side) or position of comfort.
6. If the bee stinger is present in the skin, remove it gently by scraping it out.

7. Monitor the person for a secondary reaction (biphasic reaction) for up to 72 hours initial exposure.
8. Call parent/guardian, if the person is a student, within the hour. Encourage them to notify the individual's primary care provider.
9. Thoroughly document the incident on an incident report form.
10. **Notify the Director of Pupil Services the same day as the incident.**

Trained Staff: Team members who should be involved in creating an allergen-safe school environment and responding to an anaphylactic emergency, if necessary, may include school district administrators, medical emergency response team members, teachers, aides, food service personnel, coaches, athletic director and after-school volunteers, transportation personnel and any other staff as delegated by school administrators.

Training of Staff: Annual emergency medication training for school staff should include training in the use of epinephrine auto-injections, using the knowledge and hands-on training guidelines of the WI Dept of Public Instruction. Training programs from the American Heart Association, Red Cross or other health education organizations may also be used.

Location of Stock Epinephrine Auto-injectors: Stock Epi-Pens® will be maintained by the north and south office personnel. There will be at least 2 EpiPens® located in each office during the school day. They will be located in each office or health room in an unlocked and labeled location during the school day. However, these locations will be locked before and after school hours. Therefore, if your child is in after school activities, please note that their epi-pen will not be accessible to them.

Liability: St. Mary's Springs Academy, with its staff who administer epinephrine auto-injectors, are immune from civil liability for any harm that may result, regardless of whether there is a parental or medical provider's authorization, unless the administration was a result of gross negligence or willful misconduct.