Treating severe allergic reactions (Anaphylaxis)

Tips for school nurses

Anaphylaxis is a sudden and severe allergic reaction that can be life threatening. In extreme cases, it can cause death. Some children may have their first episode at school, so school nurses need to know what to do.

What causes anaphylaxis?
- Food allergies
- Severe allergic reactions to such things as stings from bees, wasps or fire ants
- Latex allergies
- Allergic reactions to medicines (both new and long-term)

What are the symptoms?*
- Itching and swelling of the lips, tongue or mouth, and a tingling sensation or metallic taste in the mouth
- Itching, tightness in the throat, hoarseness and hacking cough
- Hives, sensation of warmth, itchy rash and swelling of the face or extremities
- Nausea, abdominal cramps, vomiting and diarrhea
- Hoarseness, shortness of breath, repetitive coughing and wheezing
- Faint pulse, passing out
- Face and body turning pale or red
- General feeling of impending doom

*Symptoms can potentially progress to a life-threatening situation. The severity of symptoms can change quickly.

How is anaphylaxis treated?
- Epinephrine is a medicine that is commonly used to treat anaphylaxis.
- This medicine only provides short-term relief.
- Epinephrine is only available by prescription.
- It comes in the form of an auto injector (injection).
- Auvi-Q, EpiPen, EpiPen Jr. or Twinject are common brands.
- Give the epinephrine injection as soon as symptoms of anaphylaxis occur.
- Practice before you use epinephrine on a student.
- The effects of epinephrine only last for 10 to 20 minutes.
- Call 911 immediately after injection.

How can I manage a reaction at school?
- Identify the students who are most at risk and work closely with their parents.**
- Ask each student about food or other life-threatening allergies, especially if epinephrine is not included on a student’s list of medicines.
- Suggest that parents work with a healthcare provider to develop an Anaphylaxis Action Plan.
- Request permission from parents to share information about their child with school staff members, including:
  - Teachers
  - Office staff
  - Bus drivers
  - Administrators
  - Cafeteria staff
  - Physical education staff
  - Media center staff

**If a child has asthma and severe allergies, he is at a higher risk for a severe allergic reaction.

Anaphylaxis Action Plan
- If a student in your school uses epinephrine, he should have an Anaphylaxis Action Plan.
- This is an emergency plan that outlines what to do when a student has a severe allergic reaction.
- Make sure you get an action plan for each student at risk for anaphylaxis.
• Inform parents of an at-risk student that you have reviewed their child's action plan.
• Let parents know that the school has emergency procedures in place.
• Fill out a new action plan for at-risk students each year.

**Why do students need a new Anaphylaxis Action Plan each year?**
• To make sure you have up-to-date information from parents and healthcare providers.
• To make sure contact information is correct.
• To check that the correct version of epinephrine is being used—EpiPen Jr. and Twinjec (.15 mg) are for children who weigh between 33 and 66 pounds and EpiPen and Twinject (.30 mg) are for children who weigh more than 66 pounds.

**Additional topics for discussion**
• Food allergies
  – Send a letter from the parent of the allergic child to other parents in the classroom explaining the student’s allergies.
  – Bring an action plan and epinephrine (and other medicines listed on the emergency plan) on school field trips.
  – Have access to a cellphone to dial 911.
  – Know the address of the field trip location so emergency responders can find you quickly.
• Insect stings
  – Frequently inspect school grounds for fire ant mounds, beehives and wasp nests.
  – Have access to epinephrine during outdoor activities, such as:
    – Field trips
    – After-school programs
    – Recess
    – Physical education class
    – Field days
• Latex allergies
  – Keep a small supply of latex-free gloves and adhesive bandages for students with latex allergies.
  – Students who have been repeatedly exposed to products with latex are at higher risk for several latex allergies.

**Follow the “Three R’s” in the event of a reaction:**
If a student has a severe allergic reaction at school, use these helpful tips: (adapted from the Food Allergy Network’s School Food Allergy Program)
• Recognize the symptoms.
• React quickly.
• Review what caused the reaction, and how well the emergency plan worked.

This is general information and is not specific medical advice. Always consult with a doctor or healthcare provider if you have questions or concerns about the health of a child.

Visit choa.org/child-health-glossary or more information about latex allergies and treating anaphylaxis with epinephrine.

Visit foodallergy.org for information about implementing a plan of action for students at your school with food allergies.

©2013 Children’s Healthcare of Atlanta Inc. All rights reserved. CHth 954315:12/13