West Chester Area School Dist	rict: ALLERGY ACTION	PLAN (www.foodallergy.com)
Na <u>me:</u>		D.O.B.:
Allergy		
Weight:lbs. Asthma: [ ] Yes (h	nigher risk for a severe	reaction) [ ] No
	_	s) to treat a severe reaction. USE EPINEPHRINE.
·		
Extremely reactive to the following allerg	ens:	THEREFORE:
[ ] If checked, give epinephrine immediate	ely if the allergen was	LIKELY eaten, for ANY symptoms.
[ ] If checked, give epinephrine immediate apparent.	ely if the allergen was	DEFINITELY eaten, even if no symptoms are
FOR <b>ANY</b> OF THE FOLLOWIN	IG:	MILD SYMPTOMS
SEVERE SYMPTOMS		
LUNG HEART THROAT Short of Breath, Pale, Blue, Faint Tight, hoarse,	MOUTH Significant swelling tongue/and or lips	NOSE MOUTH SKIN GUT  Itchy/Runny Itchy Mouth A few hives Mild Nausea/ Nose, sneezing mild itch discomfort
Wheezing, weak pulse, dizzy trouble Repetitive cough breathing/swa	=	FOR <b>MILD SYMPTOMS</b> FROM <b>MORE THAN ONE</b> SYSTEM AREA, GIVE EPINEPHRINE.
	/	SYSTEM AREA, FOLLOW THE DIRECTIONS BELOW:  1. Antihistamines may be given, if ordered by a healthcare provider.
<ol> <li>INJECT EPINEPHRINE IMMEDIATELY.</li> <li>Call 911. Tell emergency dispatcher the person is having anaphylaxis</li> </ol>		<ol> <li>Stay with the person; alert emergency contacts.</li> <li>Watch closely for changes. If symptoms worsen, give</li> </ol>
		epinephrine.
<ul> <li>and may need epinephrine when emergency re</li> <li>Consider giving additional medications following</li> <li>Antihistamine</li> <li>Inhaler (bronchodilator) if wheezing</li> </ul>	·	MEDICATIONS/DOSES
<ul> <li>Lay the person flat, raise legs and keep warm. If breathing is difficult or they are vomiting, let them sit up or lie on their side.</li> </ul>		Epinephrine Brand or Generic:  Epinephrine Dose: [ ] 0.15 mg IM [ ] 0.3 mg IM
• If symptoms do not improve, or symptoms return, more doses of epinephrine can be given about 5 minutes or more after the last dose.		Antihistamine:Other (e.g., inhaler-bronchodilator if wheezing):
Alert emergency contacts.  Transport actions to ED, over if avantages are recommendated.	alua Datiant di suldum	
<ul> <li>Transport patient to ER, even if symptoms reso in ER for at least 4 hours because symptoms m</li> </ul>		n
Physician/HCP		Student May Self Administer: ( ) Yes ( ) No
Parent/Guardian	Date:	_