

## Protocol- Treatment of Anaphylaxis and Standing Order

In the event of an anaphylactic reaction of a student or staff member 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, and wheat Pollen
2. Insect sting, usually bee or wasp
3. Medication
4. Exercise
5. Asthma triggers
6. Latex

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

**Serious signs and symptoms include:**

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

Laryngospasm (closing of air passage from swelling) can occur as part of anaphylaxis or by itself. It requires the same management as anaphylaxis and requires establishment of an airway. Call 911.

**Management Guidelines:**

1. Confirm signs of serious anaphylaxis
2. Administer Epi-Pen® or Epi-Pen Jr.®  
If weight > 60 pounds (approx. 8 year old) give Epi-Pen® (0.3mg)  
(intramuscular injection)

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PROTOCOL (rev 2/14)

If weight ~30-60 pounds give Epi-Pen Jr.® (0.15mg) (intramuscular injection)

\*If available, a second dose of epinephrine can be given 5 minutes or more after the first if symptoms persist or recur.

3. Call 911 (EMS) and inform them you are giving an Epi-Pen for anaphylaxis
4. Call parent or guardian
5. Maintain airway and monitor circulation and start CPR as necessary
6. Place person in recovery position (on side) or position of comfort
7. If bee stinger is present in the skin, remove it gently by scraping it out.
8. Monitor student for secondary reaction (biphasic reaction) for up to 72 hours *after* initial exposure.

7-27-16  
Date

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