

Form ADMIN 317-01 Consent for Intervention during an Emergency Allergic Reaction

Consent for Intervention during an Emergency Allergic Reaction		
STUDENT INFORMATION: (to be completed by the parent/guardian)		
Name of Student:	Date of Birth:	
Street Address:		
Name of Mother:	Home Phone:	Work Phone:
Name of Father:	Home Phone:	Work Phone:
Emergency Contact Person:	Phone:	
PHYSICIAN INFORMATION: (to be completed by the physician)		
Nature of Allergy:		
Symptoms of Reaction:		
Recommended Response to Reaction:		
Medication:	Dosage:	
Additional Instructions or Information:		
Signature of Physician:	Date:	
Parent Consent is required for school personnel to administer the recommended medication to the child in case of an extreme allergic reaction. Please provide this consent by signing below:		
I give the school my consent to administer the required medication identified above to:		
_____ during an extreme allergic reaction.		
Student's Name	_____	
	Parent(s)/Guardian(s) Signature	

EMERGENCY ACTION PLAN: ANAPHYLAXIS

[INSERT PHOTO OF STUDENT]

For use in classroom, staff room, office

Student's Name	
Allergens	
Allergy Description	List restrictions for this student, if any

POSSIBLE SYMPTOMS (Please check all that apply)

- Flushed face, hives, swelling or itchy lips, tongue, eyes
- Tightness in throat, mouth, chest
- Difficulty breathing or swallowing, wheezing, coughing, choking
- Vomiting, nausea, diarrhea, stomach pains
- Dizziness, unsteadiness, sudden fatigue, rapid heartbeat

EMERGENCY ACTION PLAN (SAMPLE NO. 1)

Plan 1

- ✓ Use Epi-Pen immediately.
- ✓ HAVE SOMEONE CALL AN AMBULANCE and advise the dispatcher that a child is having an anaphylactic reaction.
- ✓ If ambulance has not arrived in 10-15 minutes and breathing difficulties are present, give a second Epi-Pen, if available.
- ✓ Even if symptoms subside entirely, this child must be taken to the hospital immediately.

EMERGENCY ACTION PLAN (SAMPLE NO. 2)

Plan 2

- ✓ Give _____ antihistamine _____ (Brand/Dosage) _____ immediately.
- ✓ Segregate child and watch him or her closely.
- ✓ Be prepared to administer Epi-Pen at any sign of breathing difficulty as this can occur very quickly (within seconds).
- ✓ If Epi-Pen is administered, transport the child to hospital immediately.

EMERGENCY ACTION PLAN (SAMPLE NO. 3)

Plan 3

Note: Epi-Pen and Antihistamine are kept: _____

Doctor: _____ Date: _____

Parent/Guardian: _____ Date: _____

SAMPLE LETTER –THAT COULD BE SENT TO ALL PARENTS

Date:

Dear Parents:

I hope you will consider this letter very carefully and join the staff in taking care to ensure the safety of all the children in Moosonee Public School.

One of our students has a condition called Anaphylaxis. Anaphylaxis is a severe peanut allergy that can result in death for the child. This child is in junior kindergarten and we must all join together to ensure the child's safety. A child with this condition is not only allergic to peanuts, but also to any form of nut products—peanut butter, chocolate, things made of peanut oil, residue on any materials that have been touched by hands that have not been properly washed of peanut oil.

Parents of all students are requested to not pack any foods containing nut products in their children's lunches or snacks. The school may examine food items that students bring to school to determine if they contain, or might contain an allergen. These foods may be removed and kept in the Office until the end of the school day, or until a parent or guardian can come to the school to retrieve the item. If it appears to be safe to do so, the item may be sent home with the student. The following guidelines must be strictly adhered to by all the students in the school.

1. All foods must be eaten in the classroom—absolutely not outside or on the bus.
2. Snacks are not to be shared with other students.
3. Utensils are not to be shared with other students.
4. Hands are to be washed after eating anything that may contain peanut products. Traces of peanut butter or oil can get on the bus seats or playground equipment, desks, and personal belongings.
5. Parent are asked to read labels carefully for the following products that may contain nut products:

Granola bars, crackers, chocolate bars, cookies, some cereals, any store-baked goods or snacks.

On behalf of the student and the parents of the child, I thank you for your cooperation.

Sincerely yours,

Principal

SAMPLE LETTER –THAT COULD BE SENT TO PARENTS OF STUDENTS IN ONE CLASS

Date:

Dear Parents:

RE: PEANUT ALLERGIES

As many of you know, a child in our class has an extreme allergy to peanuts. This includes any food that has peanuts or peanut oil or flour in it. The allergy of the child is so severe that it could be life-threatening. The child may have a reaction if an item containing peanuts is even in his or her proximity.

All our staff members have been made aware of this situation and have been instructed by the school nurse on the correct procedures regarding anaphylactic shock. Prevention, of course, is the best approach and, therefore, we request that you consider this information when packing your child's lunch and also when sending food to be shared, or for bake sales.

We endeavor to make the school a safe environment for all students and we ask for your cooperation.

Sincerely yours,

Classroom Teacher