STANDING ORDER

AUTO-INJECTOR EPINEPHRINE ADMINISTRATION FOR ANAPHYLAXIS In the event of an anaphylactic reaction in an individual in the school setting, epinephrine will be administered by the school nurse or trained unlicensed school personnel. This Standing Order is for the use of auto-injector epinephrine in such situations.

In the case of students with a history of anaphylaxis or other severe allergic reactions, epinephrine should be administered according to specific individualized prescriptive orders documented in their individualized health care plans. If no such orders exist or are not readily available, the Standing Orders given in this document should be used.

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

CAUSES: Extreme sensitivity to one or more of the following: Medication Exercise induced Foods Latex Idiopathic (unknown) Insect stings Other Asthma triggers

PHYSICAL FINDINGS: Common symptoms associated with anaphylaxis:

- 1. Difficulty breathing, wheezing
- 2. Hives, generalized flushing, itching, or redness of the skin
- 3. Swelling of the throat, lips, tongue, throat; tightness/change of voice; difficulty swallowing
- 4. Tingling sensation, itching, or metallic taste in mouth
- 5. Feeling of apprehension, agitation

STANDING ORDER:

1. Based on symptoms, determine that an anaphylactic reaction appears to be occurring. Act quickly. It is safer to give epinephrine than to delay treatment.

Anaphylaxis is a life-threatening reaction.

2. (If you are alone and are able to provide epinephrine, call out or yell for help as you immediately go get the epinephrine. Do not take extra time seeking others until you have provided the epinephrine.)

3. (**If you are alone and do not know how to provide epinephrine,** call out or yell for help.) If someone is available to help you, have them get the personnel trained to provide epinephrine and the epinephrine while you dial 911 and follow the dispatcher's instructions. Advise 911 operator that anaphylaxis is suspected and epinephrine is available. Your goal is to get someone (EMS or trained personnel) to provide epinephrine and care as soon as possible.)

4. Select appropriate epinephrine auto-injector to administer, based on weight.

Dosage: 0.15 mg Epinephrine auto-injector IM, if less than 66 pounds 0.30 mg Epinephrine auto-injector IM, if 66 pounds or greater

Frequency: If symptoms continue, a second dose should be administered 5 to 15 minutes after first dose

5. Inject epinephrine via auto-injector: Pull off safety release cap. Swing and jab firmly into upper, outer thigh, (through clothing if necessary). **Hold in place for 10 seconds to deliver medication and then remove.** Massage the area for 10 more seconds. Note the time.

6. Call or have a bystander call 911 immediately or activate the Emergency Medical System (EMS). Advise 911 operator that anaphylaxis is suspected and epinephrine has being given.

7. Keep the individual either lying down or seated. If they lose consciousness, check if they are breathing and have a pulse. If not, begin CPR (cardiopulmonary resuscitation), call out for help and continue CPR until the individual regains a pulse and is breathing or until EMS arrives and takes over.

8. Call School Nurse/Front Office school personnel and advise of situation.

9. Repeat the dose after 5 to 15 minutes if symptoms persist or return.

10. Stay with the individual until EMS arrives, continuing to follow the directions in No. 7 above.

11. Provide EMS with Epinephrine auto injector labeled with name, date, and time administered to transport to the ER with the student.

FOLLOW UP (to be done the same day as the event):

1. Assure parents/guardians have been notified.

2. Complete required documentation of incident.

3. Order replacement epinephrine auto injector(s). Contact Director of SPED and Related Services for replacement.

Date___

Physician/Licensed Prescriber Signature

Print Name, please _____

* Effective for School Year _

*Must be renewed annually and with any change in prescriber.

Approved:

August 22, 2012 by the Superintendent