

Health Services

Anaphylaxis/Allergic Reactions

An allergy is an abnormal response to a food, medication, environmental agent, or animal. An allergic reaction is triggered by the body's immune system. Reactions vary from person to person. Some may be mild and some may be severe, leading to life threatening symptoms and even death. Anaphylaxis is defined as:

- a severe, life threatening allergic reaction
- a well-defined antigen-antibody reaction
- a hypersensitive state of the body to a foreign protein or a drug, food, medication, insect bite, latex, etc.
- sudden in its development and may be fatal.

Signs and symptoms of a severe allergic reaction to food or other agent may include some or all of the following:

Body System	Sign or Symptom
Mouth	Tingling, itching, swelling of the tongue, lips, or mouth; blue/grey color of the lips
Throat	Tightening of the throat; tickling feeling in the back of throat, hoarseness or change in voice
Nose/Eyes/Ears	Runny, itchy nose; redness and /or swelling of eyes; throbbing in ears
Lungs	Shortness of breath, repetitive shallow cough; wheezing
Stomach	Nausea; vomiting; diarrhea; abdominal cramps
Skin	Itchy rash; hives, swelling of face or extremities; facial flushing
Heart	Thin weak pulse; rapid pulse; palpitations; fainting; blueness of lips, face or nail beds; paleness

Food allergies have risen in incidence. Current estimates state that between every 1 in 13 and 1 in 25 school aged children are affected. 40% of those children have reported a history of a severe reaction. The eight most common food allergies that account for 90% of food allergy reactions are milk, eggs, peanuts, tree nuts, fish, shellfish, soy, and wheat (National Institute of Allergy and Infectious Diseases [National Institute of Allergy and Infectious Disease] (NIAID), 2010). School personnel should be ready to effectively manage students with known food allergies and should also be prepared to recognize symptoms of an allergic reaction in diagnosed and undiagnosed students in order to respond to the student's emergency needs.

In response to the rise in food allergies and to increase community awareness, Senate Bill 27 amends Chapter 38 of the Texas Education Code by adding Section 38.0151. A policy must be adopted by school districts to care for students with food allergies.

Mansfield ISD's comprehensive plan to manage students with food allergies includes the following elements:

IDENTIFICATION AND PLANNING

- Identification of students with food allergies who are at risk for anaphylaxis.
 - Parents/guardians will notify the school of allergies/health concerns. Allergies are identified on the Emergency Health Information Sheet filled out online or on paper during registration each year.
 - School nurse will review Emergency Health Information Sheet for health conditions. For specific allergies identified (not seasonal):
 - Send home the "Parent Statement of Food/Environmental Allergy Information."
 - Review returned parent statement and determine steps needed for the individual student. If reaction is termed "mild", use nursing judgment to determine initiation of any further paperwork. If termed "life threatening", initiate needed paperwork and interventions (EAP, IHP, medication permits, obtaining epi pen and benadryl, 504, class letter, special plan with food service/custodial staff, transportation, etc.) .
 - *Enter information into Skyward system under "Health Conditions". **If the condition is potentially life threatening, also enter information under "Emergency Information—Alert Information Section."** (Example: "Peanut allergy, epi pen, student carries, careplan in place" or "Peanut allergy, epi pen in clinic, careplan in place.")*
- Development, communication, implementation and monitoring of Emergency Action Plans, Individualized Health Care Plans, and/or 504 plans.
 - After reviewing the parent statement, the nurse will contact parent and discuss needs of student, if necessary.
 - Nurse will furnish parent with:
 - Emergency Action Plan for Severe Allergic Reaction or Anaphylaxis.
 - Medication permits for Epi Pen and Benadryl
 - Allergy Free Table Request (If you have determined that the intervention might be necessary for the student)

- Parent/guardian and physician will fill out/sign any or all of the forms regarding allergies as applicable to the student. Forms should be returned to the nurse as quickly as possible. A copy of the IHP must be given to the student’s counselor for a 504 evaluation.
 - Parent/guardian will provide Benadryl (preferably LIQUID form), Epi Pens as indicated in plan.

- **Additional Information:**
 - *Texas law states that students may carry their epi pen if the parent and physician sign off that they have permission and have been trained. A backup should be kept in the clinic. It may be wise for students who travel for UIL events in middle or high school to consider this option.*
 - *The US Department of Agriculture regulations require substitutions or modifications in school meals for children whose disabilities restrict their diets. When in the licensed physician’s assessment, food allergies may result in severe, life-threatening (anaphylactic) reactions, the child’s condition would meet the definition of “disability,” and the substitutions prescribed by the licensed physician must be made. The school nutrition program must receive a signed statement by a licensed physician that identifies:*
 - *The child’s disability*
 - *An explanation of why the disability restricts the child’s diet*
 - *The major life activity affected by the disability*
 - *The food or foods to be omitted from the child’s diet and the food or choice of foods that must be substituted*
 - Nurse will distribute EAP or IHP to all teachers and staff who have the student, making sure to include outside activity sponsors, transportation, and student nutrition personnel. The plans shall be distributed to MISD staff members with a “Need to Know.” Teachers will keep a copy of the plan in their sub notebook to relay the information to any substitute teacher with a need to know.

- Environmental control measures, to reduce the risk of exposure to a food allergen, including safe food handling, hand washing, and cleaning products.
 - Nurse, administrator, teacher, food service director, custodian (and any other parties as determined) will determine the necessary interventions to accommodate the students with life threatening allergies.
 - Interventions may be but are not limited to:
 - “Allergy Free” eating area or table (*Parents will fill out the Allergy Free Table Request if student needs the intervention and return it to the nurse.*)

- Steps for cleaning
 - Steps for food preparation/serving
 - “Food Allergy Notice for Parents” letter to classmates
 - Additional posting of Allergy Aware poster or purchased posters concerning anaphylaxis in common areas of the school
 - Educate students not to share their food with any other student
 - Other interventions as determined
- A written plan should be documented for the student/school.
 - Plan will be reviewed at the beginning of each school year.
 - The teacher, parent, and nurse will work together to ensure that the student is protected during any field trips.
- Training for School Staff on Recognition of Anaphylaxis and appropriate response
 - Level 1 Training to all school staff, including cafeteria workers and bus drivers
 - Power point covering allergies and anaphylaxis to be shown at the beginning of each school year.
 - General review of Emergency Health Plans/Procedures for anaphylactic reactions.
 - Demonstration of Epi Pen administration.
 - Location and accessibility of Epi Pens and Benadryl
 - Post test or sign in sheet (To be kept by clinic nurse).
 - After Level 1 Training is completed each year, a sign will be posted in a prominent place at the entrance of the school building stating that the School is “Food/Environmental Allergy Aware Campus”.
 - Level 2 Training to those who have a student in their class with a food or environmental allergy action plan/Epi Pen
 - Review of action plan and administration of Epi Pen
 - Planning for class notification letter
 - A copy of the Food Allergy Action Plan signed by the MD and the parent can be given to the cafeteria manager to enter a note about the allergy into the computer system. This is for informational purposes. This is not sufficient for food substitutions (See above).
 - Planning with food service, custodial staff, and administrators in building for the safety of the student.
- Post Anaphylaxis reaction-review of policy and procedures: If an incident occurs at school, the nurse will meet with all those parties involved in the incident within 48 hours to review/revise procedures. Suggested review items include:

- Identification of the source of the allergen exposure
- Steps to prevent future exposure
- Review of Allergy Emergency Action Plan
- Interview of the student and witnesses regarding events leading up to incident
- Work with Child Nutrition if allergen was due to food served by the school
- Review IHP, EAP, 504 plans
- Replacement of Epinephrine Pen if used at school
- In the event of a fatal reaction, the district crisis plan will be activated

TREATMENT GUIDELINES

- Observe symptoms. These may include:
 - anxiety or marked apprehension
 - urticaria (hives with itching)
 - generalized edema
 - profound respiratory distress (starts with “lump in throat” to choking, wheezing, labored breathing)
 - asphyxia (lack of oxygen with skin color pale, then mottles or is bluish)
 - circulatory collapse (causes shock symptoms of increased heart rate, drop in blood pressure, clammy skin, dizziness, confusion)
 - incontinence
 - loss of consciousness
 - convulsions.

The most dangerous symptoms include breathing difficulties and a drop in blood pressure or shock, which is potentially fatal.

- Assess student and check individual Health Care Plan/Emergency Action Plan/Food Allergy Action Plan for instructions
- Give emergency medications as ordered by student’s physician (ex: Benadryl and/or Epi Pen, if student has it available in nurse’s office)

If Epi Pens are in the clinic, during the school day they should be kept in an easily accessible, unlocked location (ex., in a basket on the nurse’s desk or counter top). The pen should be kept in its box and labeled with the student’s name. Make sure all staff know where the Epi Pens are kept during the day.

- Call 911
- Maintain airway, assist with breathing, perform CPR as indicated
- Contact parents
- Keep student warm and dry
- Keep student flat and elevate feet unless leg is site of insect bite. Keep affected part below the level the heart
- Monitor student’s blood pressure and pulse

Documents Related to Anaphylaxis/Allergic Reaction:

[Form-Emergency Action Plan for Severe Allergic Reaction.pdf](#)
[Form-Teacher Letter for Student with Careplan.docx](#)
[Form-Food Allergy Notice for Classroom.pdf](#)
[Form-Campus Allergy Aware Certificate.docx](#)
[Form-Food Allergy Notice for Classroom.pdf](#)
[Form-Letter to Parent Regarding Food Allergies.docx](#)
[Form-Parent Statement of Food Environmental Allergy Information.pdf](#)
[Form-Request for Allergy Free Table.pdf](#)
[Form-Epi Pen Skills Check Off.xlsx](#)
[Resource-Food Allergy Management in the School Setting.pdf](#)

Resources:

Mayo Clinic. (2011). Anaphylaxis. Retrieved from
<http://www.mayoclinic.com/health/anaphylaxis/DS00009>

The Food Allergy & Anaphylaxis Network (FAAN™). (2012). Retrieved from
<http://www.foodallergy.org>

[SB 27 guidelines FINAL - Texas Department of State Health Services](#)
www.dshs.state.tx.us/schoolhealth/docs/SB-27-guidelines-FINAL.doc