

In the event of anaphylaxis in an individual at school or school-sponsored activities, an epinephrine auto-injector will be administered by trained school personnel according to the protocol set forth herein.

DEFINITION

Anaphylaxis is a severe life-threatening allergic reaction. It may occur within minutes after a triggering event or up to an hour or more later.

CAUSES, SIGNS AND SYMPTOMS

Anaphylaxis is typically caused by extreme sensitivity to one or more of the following: food; latex; insect sting; or medication. It may also be exercised-induced or the cause may be unknown. Signs and symptoms include:

- Hives, itchy rash and/or swelling about the face, body or extremities;
- Flushing and/or swelling of the face;
- Itching around the eyes, redness and swelling of the eyes, and tearing of the eyes;
- Itching and/or swelling of the lips, tongue or back of the throat;
- Itching and/or sense of tightness in the throat, hoarseness, difficulty breathing and/or swallowing;
- Itching of the outer ear canals;
- Shortness of breath, repetitive coughing and/or wheezing chest tightness, harsh high-pitched breathing;
- Weak pulse, low blood pressure;
- Light headedness, feeling faint, fainting, collapse;
- Nausea, abdominal cramps, vomiting; and
- Distress, anxiety, and a sense of dread.

The most dangerous symptoms of anaphylaxis include breathing difficulties and a drop in blood pressure or shock that are potentially fatal.

PERSONNEL AUTHORIZED TO ADMINISTER EPINEPHRINE

The following individuals are authorized to administer epinephrine by auto-injector:

1. Licensed school personnel such as the school nurse (RN or LPN) or athletic trainer.
2. Health technicians.
3. Unlicensed assistive personnel (UAP), who are individuals trained in accordance with Policy 561 and these procedures to administer epinephrine by auto-injector.

ANNUAL TRAINING OF SCHOOL PERSONNEL

School personnel will receive annual training on the recognition of anaphylaxis and procedures to follow when anaphylaxis occurs or is suspected. The training should be conducted by a regulated health care professional whose competencies include the recognition of the symptoms of anaphylaxis and the procedures to follow when anaphylaxis occurs. The regulated health care professional includes but is not limited to a licensed school nurse, a certified emergency medical technician, or a licensed athletic trainer.

The district may select at least two (2) school site personnel per school, in addition to the school nurse or licensed athletic trainer, to receive an annual training in the recognition of anaphylaxis symptoms and procedures to follow when anaphylaxis occurs, so that they would be able to administer epinephrine by auto-injector to someone suspected of having anaphylaxis. The training may be online and will cover, at a minimum, the components set forth in Policy 561 (Administering Medications). The school site personnel who are trained to administer auto-injector epinephrine should read and understand the auto-injector instructions. In addition, they should watch a training video from the manufacturer's website on how to administer epinephrine by auto-injector.

OBTAINING AND MAINTAINING A STOCK OF AUTO-INJECTABLE EPINEPHRINE

In addition to prescription epinephrine auto-injectors the parents/guardians of a student provide for their child who is known to be at risk for anaphylaxis, each school in the district is authorized to stock at least two (2) juvenile doses (0.15 mg) and at least two (2) adult doses (0.3 mg) of auto-injectable epinephrine pursuant to a standing order prescribed by a physician, advanced practice registered nurse (NP), or physician assistant. Auto-injectable epinephrine may be purchased from a pharmacy or pharmaceutical supply company using the signed standing order.

The auto-injectable epinephrine should be stored at room temperature and in a secure, unlocked, easily accessible location at the school. Do not refrigerate auto-injectable epinephrine. The optimal temperature to store auto-injectable epinephrine is between 68° and 77° F (with an acceptable range of 59° - 86° F). The epinephrine auto-injector supply should be protected from excessive heat or cold and protected from light.

A list of the individuals authorized to administer auto-injectable epinephrine by standing order should be stored next to the school's supply of auto-injectable epinephrine. The list should also be maintained in the school's administrative offices.

The school nurse or other designated school personnel should document monthly that they have checked to ensure that the supply of epinephrine auto-injectors are being properly stored, that the epinephrine solution is clear, that there are no particles in the solution, and that the expiration date has not been passed. If the solution is discolored or if it contains a precipitate, the auto-injector should be replaced. The epinephrine auto-injectors should be replaced before their expiration date.

RESPONDING TO ANAPHYLAXIS

If student-specific orders are on file with the school, they should be followed for students with known life-threatening allergies and/or anaphylaxis. Students who have been prescribed epinephrine by auto-injector and who have their own epinephrine auto-injector at the school or school-sponsored event should use or be given their own epinephrine auto-injector.

For suspected anaphylaxis without specific orders, trained and authorized personnel will follow the protocol set forth below:

1. Based on symptoms, determine that an anaphylactic reaction is occurring.
2. Place the individual in a supine position. If experiencing respiratory distress or breathing is compromised place in a position of comfort. If unconscious place on side and monitor their airway.
3. Determine the proper dose and administer epinephrine. Diagrams and directions for all epinephrine auto-injector options will be posted in the school nurse's office.
 - a. Remove Epi-Pen from case.
 - b. Pull off blue safety cap.
 - c. Press the orange tip of the Epi-Pen firmly against the outer upper thigh. Position it at a right angle to the thigh. Medication can be administered through clothing. Apply moderate pressure to activate concealed needle and inject medication. **Hold for a count of 3 seconds.**
 - d. Remove Epi-Pen. Massage the injection site for 10 seconds. The needle will be covered with the orange tip. Retain used Epi-Pen to give to EMS.
 - e. Note the time and dose given.
4. Direct someone to call 911 and request medical assistance. Advise the 911 operator that anaphylaxis is suspected and that epinephrine has been given.
5. Stay with the individual until EMS arrives.
6. Monitor vital signs, airway and breathing.
7. Reassure and calm the individual as needed.
8. Call school nurse or front office personnel and advise of situation.
9. Direct someone to call the parent/guardian or emergency contact.

10. If symptoms continue and EMS is not on scene, administer a second dose of epinephrine 5-10 minutes after the initial injection. Note the time and dosage given.
11. Administer CPR if needed.
12. Recommend emergency room evaluation post-administration of Epi-Pen. Document the individual’s name, date, and time the epinephrine was administered on the used Epi-Pen and give to EMS to accompany the individual to the emergency room.
13. Even if symptoms subside, 911 must still respond and the individual must be evaluated by a physician, as a delayed or secondary reaction may occur.

POST ADMINISTRATION ACTIONS

After an event requiring the emergency administration of epinephrine by auto-injector using a school’s stock supply, the following actions should be taken by the school nurse or other designated school staff:

1. Complete a written documentation of the event, the rationale for giving epinephrine, the person’s response to the epinephrine, who was involved in the event, the timing of notifications to emergency responders, school administration, the student’s parents/guardians, and the physician, physician’s assistant, or NP who issued the standing order.
2. Document the date and time(s) that the auto-injector epinephrine was administered, the name of the recipient, and the name of the person administering the epinephrine.
3. Order replacement dose(s) of auto-injectable epinephrine.
4. The school administration should review the event involving emergency administration of epinephrine to determine the adequacy of the response.



LEGAL REFERENCE:

Idaho Code Sections

33-520A – Life-Threatening Allergies in Schools; Guidelines, Stock Supply of Epinephrine Auto-Injectors and Emergency Administration

ADOPTED: June 18, 2024

AMENDED: