

PURPOSE

To explain to Yarrowonga College P-12 parents, carers, staff and students the processes and procedures in place to support students diagnosed as being at risk of suffering from anaphylaxis. This policy also ensures that Yarrowonga College P-12 is compliant with Ministerial Order 706 and the Department of Education's guidelines for anaphylaxis management.

SCOPE

This policy applies to:

- all staff, including casual relief staff and volunteers
- all students who have been diagnosed with anaphylaxis, or who may require emergency treatment for an anaphylactic reaction, and their parents and carers.

AIMS

- To provide, as far as practicable, a safe and supportive environment in which students at risk of an anaphylaxis can participate equally in all aspects of the student's schooling.
- To raise awareness about anaphylaxis and the school's anaphylaxis management policy in the school community.
- To engage with parents/carers of students at risk of anaphylaxis in assessing risks, developing risk minimisation strategies and management strategies for the student.
- To ensure that each staff member has adequate knowledge about allergies, anaphylaxis and the school's policy and procedures in responding to an anaphylaxis reaction.

POLICY

School Statement

Yarrowonga College P-12 will fully comply with Ministerial Order 706 and the associated guidelines published by the Department of Education.

Anaphylaxis

Anaphylaxis is a severe, rapidly progressive allergic reaction that is potentially life threatening. The most common allergens in school aged children are peanuts, eggs, tree nuts (e.g. cashews), cow's milk, fish and shellfish, wheat, soy, sesame, latex, certain insect stings and medication.

Adrenaline given through an adrenaline auto-injector to the muscle of the outer mid-thigh is the most effective first aid treatment for anaphylaxis.

Symptoms

Signs and symptoms of a mild to moderate allergic reaction can include:

- swelling of the lips, face and eyes
- hives or welts
- tingling in the mouth.

Signs and symptoms of anaphylaxis, a severe allergic reaction, can include:

- difficult/noisy breathing
- swelling of tongue
- difficulty talking and/or hoarse voice
- wheeze or persistent cough
- persistent dizziness or collapse
- student appears pale or floppy
- abdominal pain and/or vomiting.

Symptoms usually develop within ten minutes and up to two hours after exposure to an allergen, but can appear within a few minutes.

Treatment

Adrenaline given as an injection into the muscle of the outer mid-thigh is the first aid treatment for anaphylaxis.

Individuals diagnosed as being at risk of anaphylaxis are prescribed an adrenaline autoinjector for use in an emergency. These adrenaline autoinjectors are designed so that anyone can use them in an emergency.

RATIONALE

The key to prevention of anaphylaxis in schools is knowledge of those students who have been diagnosed at risk, awareness of triggers (allergens) and prevention of exposure to these triggers. Partnerships between schools and parents are important in ensuring that certain foods or items are kept away from the students while at school.

Individual Anaphylaxis Management Plans

All students at Yarrowonga College P-12 who are diagnosed by a medical practitioner as being at risk of suffering from an anaphylactic reaction must have an Individual Anaphylaxis Management Plan. When notified of an anaphylaxis diagnosis, the Principal of Yarrowonga College P-12 is responsible for developing a plan in consultation with the student's parents/carers.

Where necessary, an Individual Anaphylaxis Management Plan will be in place as soon as practicable after a student enrolls at Yarrowonga College P-12 and where possible, before the student's first day. Parents and carers must:

- obtain an ASCIA Action Plan for Anaphylaxis from the student's medical practitioner and provide a copy to the school as soon as practicable
- immediately inform the school in writing if there is a relevant change in the student's medical condition and obtain an updated ASCIA Action Plan for Anaphylaxis
- provide an up-to-date photo of the student for the ASCIA Action Plan for Anaphylaxis when that Plan is provided to the school and each time it is reviewed
- provide the school with a current adrenaline autoinjector for the student that has not expired;
- participate in annual reviews of the student's Plan.

Each student's Individual Anaphylaxis Management Plan must include:

- information about the student's medical condition that relates to allergies and the potential for anaphylactic reaction, including the type of allergies the student has
- information about the signs or symptoms the student might exhibit in the event of an allergic reaction based on a written diagnosis from a medical practitioner
- strategies to minimise the risk of exposure to known allergens while the student is under the care or supervision of school staff, including in the school yard, at camps and excursions, or at special events conducted, organised or attended by the school
- the name of the person(s) responsible for implementing the risk minimisation strategies, which have been identified in the Plan
- information about where the student's medication will be stored
- the student's emergency contact details
- an up-to-date ASCIA Action Plan for Anaphylaxis completed by the student's medical practitioner.

Review and updates to Individual Anaphylaxis Management Plans

A student's Individual Anaphylaxis Management Plan will be reviewed and updated on an annual basis in consultation with the student's parents/carers. The plan will also be reviewed and, where necessary, updated in the following circumstances:

- as soon as practicable after the student has an anaphylactic reaction at school
- if the student's medical condition, insofar as it relates to allergy and the potential for anaphylactic reaction, changes
- when the student is participating in an off-site activity, including camps and excursions, or at special events including fetes and concerts.

Our school may also consider updating a student's Individual Anaphylaxis Management Plan if there is an identified and significant increase in the student's potential risk of exposure to allergens at school.

Adrenaline autoinjectors for general use

Yarrowonga College P-12 will maintain a supply of adrenaline autoinjector(s) for general use, as a back-up to those provided by parents and carers for specific students, and also for students who may suffer from a first time reaction at school.

Adrenaline autoinjectors for general use will be stored at College Sick Bays and labelled "general use". The principal or First Aid Officers are responsible for arranging the purchase of adrenaline autoinjectors for general use, and will consider:

- the number of students enrolled at Yarrowonga College P-12 at risk of anaphylaxis
- the accessibility of adrenaline autoinjectors supplied by parents
- the availability of a sufficient supply of autoinjectors for general use in different locations at the school, as well as at camps, excursions and events
- the limited life span of adrenaline autoinjectors, and the need for general use adrenaline autoinjectors to be replaced when used or prior to expiry.
- The limited life span of adrenaline autoinjectors, and the need for general use adrenaline autoinjectors to be replaced when used or prior to expiry.

Emergency Response

In the event of an anaphylactic reaction, the emergency response procedures in this policy must be

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followed, together with the school's general first aid procedures, emergency response procedures and the student's Individual Anaphylaxis Management Plan.

A complete and up-to-date list of students identified as being at risk of anaphylaxis is maintained by the First Aid Officers and stored at Administration First Aid Room. Posters displaying students at risk of anaphylaxis are displayed in Staff Rooms, Canteens, student's classrooms. For camps, excursions and special events, a designated staff member will be responsible for maintaining a list of students at risk of anaphylaxis attending the special event, together with their Individual Anaphylaxis Management Plans and adrenaline autoinjectors, where appropriate.

School Response Procedure

If a student experiences an anaphylactic reaction at school or during a school activity, school staff must:

Step	Action
1.	<ul style="list-style-type: none"> Lay the person flat Do not allow them to stand or walk If breathing is difficult, allow them to sit Be calm and reassuring Do not leave them alone Seek assistance from another staff member or reliable student to locate the student's adrenaline autoinjector & their or the school's general use autoinjector, and the student's Individual Anaphylaxis Management Plan, stored in the Administration Sick Bay. If the student's plan is not immediately available, or they appear to be experiencing a first time reaction, follow steps 2 to 5
2.	<p>Administer an EpiPen or EpiPen Jr (if the student is under 20kg)</p> <ul style="list-style-type: none"> Remove from plastic container Form a fist around the EpiPen and pull off the blue safety release (cap) Place orange end against the student's outer mid-thigh (with or without clothing) Push down hard until a click is heard or felt and hold in place for 3 seconds Remove EpiPen Note the time the EpiPen is administered Retain the used EpiPen to be handed to ambulance paramedics along with the time of administration <p>Administer an ANAPEN (Anapen Junior for children 7.5-30 kg, Anapen 300 for children & adults over 20kg, Anapen 500 for children and adults over 50 kg.</p> <ul style="list-style-type: none"> Pull off the black needle shield Pull off the grey safety cap from the red button Place needle end firmly against the out mid-thigh at 90° angle (with or without clothing) Press red button so it clicks and hold for 10 seconds. Remove Anapen. Note the time the Anapen is administered Retain the used Anapen to be handed to ambulance paramedics along with the time of administration
3.	Call an ambulance (000)
4.	If there is no improvement or severe symptoms progress (as described in the ASCIA Action Plan for Anaphylaxis), further adrenaline doses may be administered every five

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	minutes, if other adrenaline autoinjectors are available.
5.	Contact the student's emergency contacts.

If a student appears to be having a severe allergic reaction, but has not been previously diagnosed with an allergy or being at risk of anaphylaxis, school staff should follow steps 2 – 5 as above.

Schools can use either the EpiPen® and Anapen® on any student suspected to be experiencing an anaphylactic reaction, regardless of the device prescribed in their ASCIA Action Plan.

Where possible, schools should consider using the correct dose of adrenaline autoinjector depending on the weight of the student. However, in an emergency if there is no other option available, any device should be administered to the student.

[Note: If in doubt, it is better to use an adrenaline autoinjector than not use it, even if in hindsight the reaction is not anaphylaxis. Under-treatment of anaphylaxis is more harmful and potentially life threatening than over-treatment of a mild to moderate allergic reaction. Refer to the [Anaphylaxis Guidelines](#)].

Location of plans and adrenaline autoinjectors

A copy of each student's Individual Anaphylaxis Management Plan will be stored with their ASCIA Action Plan for Anaphylaxis in the students classroom, together with the student's adrenaline autoinjector. Adrenaline autoinjectors must be labelled with the student's name.

A copy of each student's Individual Anaphylaxis Management Plan will be stored with their ASCIA Action Plan for Anaphylaxis in the Administration Sick Bay. Whilst some students keep their adrenaline autoinjector on their person, medication for those that do not will be stored and labelled with their name at Sick Bay together with adrenaline autoinjectors for general use.

Risk Minimisation Strategies

To reduce the risk of a student suffering from an anaphylactic reaction at Yarrowonga College P-12, we have put in place the following strategies:

- staff and students are regularly reminded to wash their hands after eating;
- students are discouraged from sharing food
- gloves must be worn when picking up papers or rubbish in the playground;
- school canteen staff are trained in appropriate food handling to reduce the risk of cross-contamination
- year groups will be informed of allergens that must be avoided in advance of class parties, events or birthdays
- a general use EpiPen will be stored at the school's sick bay. Planning for off-site activities will include risk minimisation strategies for students at risk of anaphylaxis including supervision requirements, appropriate number of trained staff, emergency response procedures and other risk controls appropriate to the activity and students attending.

Communication Plan

This policy will be available on Yarrowonga College P-12's website so that parents and other members of the school community can easily access information about Yarrowonga College P-12's anaphylaxis

management procedures. The parents and carers of students who are enrolled at Yarrowonga College P-12 and are identified as being at risk of anaphylaxis will also be provided with a copy of this policy.

The principal is responsible for ensuring that all relevant staff, including casual relief staff, canteen staff and volunteers are aware of this policy and Yarrowonga College P-12's procedures for anaphylaxis management. Casual relief staff and volunteers who are responsible for the care and/or supervision of students who are identified as being at risk of anaphylaxis will also receive a verbal briefing on this policy, their role in responding to an anaphylactic reaction and where required, the identity of students at risk.

The principal is also responsible for ensuring relevant staff are trained and briefed in anaphylaxis management, consistent with the Department of Education's *Anaphylaxis Guidelines*.

Staff training

The principal will ensure that the following school staff are appropriately trained in anaphylaxis management:

- School staff who conduct classes attended by students who are at risk of anaphylaxis
- School staff who conduct specialist classes, all canteen staff, admin staff, first aiders and any other member of school staff as required by the principal based on a risk assessment.

Staff who are required to undertake training must have completed:

- an approved face-to-face anaphylaxis management training course in the last three years, or
- an approved online anaphylaxis management training course in the last two years.

Yarrowonga College P-12 uses the following training course ASCIA eTraining course (with 22303VIC, or 22300VIC or 10313NAT).

[Note, for details about approved staff training modules, see page 13 of the [Anaphylaxis Guidelines](#)]

Staff are also required to attend a briefing on anaphylaxis management and this policy at least twice per year (with the first briefing to be held at the beginning of the school year), facilitated by a staff member who has successfully completed an anaphylaxis management course within the last 2 years including School Anaphylaxis Supervisor. Each briefing will address:

- this policy
- the causes, symptoms and treatment of anaphylaxis
- the identities of students with a medical condition that relates to allergies and the potential for anaphylactic reaction, and where their medication is located
- how to use an adrenaline autoinjector, including hands on practice with a trainer adrenaline autoinjector
- the school's general first aid and emergency response procedures
- the location of, and access to, adrenaline autoinjectors that have been provided by parents or purchased by the school for general use.
- Any new staff member who does not have current accreditation will be briefed by a trained staff member and as soon as practicable, that staff member will undertake anaphylaxis management training.
- Volunteers and casual relief staff of students at risk of anaphylaxis will be informed of the students at risk and their role in responding to an anaphylaxis reaction by the Leadership Team at all 3 Campuses. All CRT staff at YCP-12 will receive a CRT folder at the beginning of the day. Included in this will be a copy of the anaphylaxis management policy and a photograph of each student who has been medically diagnosed as at risk of anaphylaxis.

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When a new student enrolls at Yarrowonga College P-12 who is at risk of anaphylaxis, the principal will develop an interim plan in consultation with the student's parents and ensure that appropriate staff are trained and briefed as soon as possible.

The principal will ensure that while students at risk of anaphylaxis are under the care or supervision of the school outside of normal class activities, including in the school yard, at camps and excursions, or at special event days, there is a sufficient number of school staff present who have been trained in anaphylaxis management.

FURTHER INFORMATION AND RESOURCES

- School Policy and Advisory Guide:
 - [Anaphylaxis](#)
 - [Anaphylaxis management in schools](#)
- Allergy & Anaphylaxis Australia: [Risk minimisation strategies](#)
- ASCIA Guidelines: [Schooling and childcare](#)
- Royal Children's Hospital: [Allergy and immunology](#)
- Health Care Needs.

Appendix A

GUIDELINES FOR ACTION

- The Leadership Team / First Aid Officers across YCP-12 will ensure that an **INDIVIDUAL ANAPHYLAXIS MANAGEMENT PLAN** (see Appendix 1) is developed, in consultation with the student's parents, for any student who has been diagnosed by a medical practitioner as being at risk of anaphylaxis.
- Photograph of students at risk of an anaphylaxis reaction will be displayed in the staff room, sick bay, Multi Purpose Room, Canteen, Yard duty bum bags and student classroom or staff office.
- The individual anaphylaxis management plan will be in place as soon as practicable after the student enrolls, and where possible before the first day of school.
- The plan will be stored with the nominated first aid officer and a copy shall be placed in an Individual Student Insulated Pack (*see Appendix 3*).
- The nominated first aid officer will also provide the parent with the '**Information for Parents Fact Sheet**' when the parent delivers the auto injector and relevant documentation. The expiry date of the auto injector should be checked at this point.
- The individual anaphylaxis management plan will set out the following:
 - Information about the diagnosis, including the type of allergy or allergies the student has (based on a diagnosis from a medical practitioner).
 - Strategies to minimise the risk of exposure to allergens while the student is under the care or supervision of school staff, for in-school and out of school settings including camps and excursions.

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- The name of the person/s responsible for implementing the strategies.
- Information on where the student's medication will be stored.
- The student's emergency contact details.
- An emergency procedures plan (ASCIA Action Plan), provided by the parent, that: sets out the emergency procedures to be taken in the event of an allergic reaction;
 - will outline the details of the most recent reaction;
 - is signed by a medical practitioner who was treating the child on the date the practitioner signs the emergency procedures plan; and
 - includes an up to date photograph of the student.
- The student's individual management plan will be reviewed, in consultation with the student's parents/ carers:
 - Annually, and as applicable.
 - If the student's condition changes, or
 - immediately after a student has an anaphylaxis reaction at school.
- It is the responsibility of the **parent** to:
 - Provide the auto-injector that has not expired to the school in a plastic, sealed bag that has the student's name clearly labelled on the front. At the P-4 & 5-8 Campus this is to be handed in at the Sick Bay, Administration Building. At the 9-12 Campus it is to be handed in at the Administration Office. Upon being handed in a copy of the child's anaphylaxis management plan will be stored with the auto-injector.
 - Provide the emergency procedures plan (ASCIA Action Plan) that has been completed in consultation with their General Practitioner. (See attached)
 - Inform the school if their child's medical condition changes, and if relevant provide an updated emergency procedures plan (ASCIA Action Plan).
 - Provide an up to date photo for the emergency procedures plan (ASCIA Action Plan) when the plan is provided to the school and when it is reviewed.
- It is the responsibility of **staff** to:
 - Ensure they read their updated policy manual and locate it at an easily accessible point of reference.
 - Familiarise themselves with the photographs of anaphylaxis students.
 - If a teacher has a child with risk of having an anaphylaxis reaction in their class, the teacher is required to be familiar with the child's Individual Management Plan.
 - Be confidential at all times and respect the feelings of students at risk of anaphylaxis by discussing strategies and alternative activities/foods (if necessary) in a private manner.
- The Principal or his/her nominee will be responsible for ensuring that a **COMMUNICATION PLAN** (see Appendix 2) is developed to provide information to all staff, students and parents about

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anaphylaxis management. This is a plan which outlines how anaphylaxis management is communicated to all staff and parents.

- Each staff member will be provided with the school anaphylaxis management policy at the beginning of each year as part of their Policy Manual.
- A photograph display will be located in the staff rooms, canteen & sick bay at each campus that has a recent photograph of any anaphylaxis students enrolled at the school. The nominated first aid officer will be responsible for updating this.

POLICY REVIEW AND APPROVAL

This policy was last updated on 22 March 2023 and is scheduled for review in March 2024.

Policy last reviewed	22/3/2023
Approved by	Principal
Next scheduled review date	March 2024

The Principal will complete the Department of Education's Annual Risk Management Checklist for anaphylaxis management to assist with the evaluation and review of this policy and the support provided to students at risk of anaphylaxis.

Yarrawonga College P-12

(Appendix 1)

Anaphylaxis Management Plan

Cover Sheet

This Plan is to be completed by the principal or nominee on the basis of information from the student's medical practitioner provided by the parent/carer

School:		Campus:
Phone:		
Student's name:		
Date of birth:		Year level:
Severely allergic to:		
Other health conditions:		
Medication at school:		
Parent/carer contact:	Parent/carer information (1)	Parent/carer information (2)
	Name:	Name:
	Relationship:	Relationship:
	Home phone:	Home phone:
	Work phone:	Work phone:
	Mobile:	Mobile:
	Address:	Address:
Other emergency contacts (if parent/carer not available):		
Medical practitioner contact		
Emergency care to be provided at school:		
EpiPen® / Anapen® storage:		
The following Anaphylaxis Management Plan has been developed with my knowledge and input and will be reviewed on		
Signature of parent:		Date:
Signature of principal (or nominee):		Date:

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Strategies To Avoid Allergens

[illegible]

(Appendix 2)

Anaphylaxis Communication Plan

Yarrowonga College P-12 recognises the importance of working with the whole school community to better understand how to provide a safe and supporting environment for all students, including students with severe allergies.

RAISING STAFF AWARENESS

All staff involved in the care of students at risk of anaphylaxis, including class teachers, office staff, Casual Relief Teachers, canteen staff, administrative and other office staff, should know:

- The causes, symptoms and treatment of anaphylaxis
- The identities of students who are at risk of anaphylaxis
- The preventative strategies in place where EpiPens are kept
- The school's first aid and emergency response procedures
- Their role in responding to a severe allergic reaction

At Yarrowonga College P-12 the procedures are as follows:

- Each staff member will be provided with the school anaphylaxis management policy at the beginning of each year as part of their Policy Manual.
- A photograph display will be located in the staff rooms of both campuses that has a recent photograph of any anaphylaxis students enrolled at the school. The nominated first aid officer will be responsible for updating this.
- All staff at Yarrowonga College P-12 will undertake training in anaphylaxis management from accredited trainers every three years.
- Any new staff member who does not have current accreditation will be briefed by a trained staff member and as soon as practicable, that staff member will undertake anaphylaxis management training.
- Volunteers and casual relief staff of students at risk of anaphylaxis will be informed of the students at risk and their role in responding to an anaphylaxis reaction by the Leadership Team.
- All CRT staff at YCP-12 will receive a CRT folder at the beginning of the day. Included in this will be a copy of the anaphylaxis management policy and a photograph of each student who has been medically diagnosed as at risk of anaphylaxis.
- All staff will be briefed each semester through either the showing of a DVD or by an accredited staff member which outlines:
 - The causes, symptoms and treatment of anaphylaxis
 - How to use an auto adrenaline injecting device
- Copies of a general ASCIA Action Plan will be displayed in the canteen, corridors and in the staff rooms.

RAISING STUDENT AWARENESS

Peer support is an important element of support for students at risk of anaphylaxis. It is important to be aware that students at risk of anaphylaxis will not want to be singled out or be seen to be treated differently.

At Yarrowonga College P-12 the procedures are as follows:

- Copies of a general ASCIA Action Plan will be displayed in the canteen and in the corridors.
- Students at risk of anaphylaxis will be encouraged to inform friends of their food allergies.
- Class teachers in Years Prep to 4 will discuss with students in class the following:
 - Always take food allergies seriously – severe allergies are no joke
 - Don't share your food with friends who have food allergies
 - Wash your hands after eating
 - Know what your friends are allergic to
 - If a schoolmate becomes sick, get help immediately
 - Don't pressure your friends to eat food they are allergic to.

(Appendix 3)

Individual Student Insulated Packs

Individual Student Insulated Packs will contain the following:

- **Child's adrenaline auto injector and/or medication**
- **A copy of the child's Management Plan**
- **A copy of the ASCIA signed by their General Practitioner**
- **A copy of instructions on how to administer an epipen or anapen.**
- **A photograph of the child, their name and year level which is to be on the front of the pack for easy identification.**

The pack is to be maintained by the First Aid Officer at each campus.



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ACTION PLAN FOR Anaphylaxis

Name: _____
Date of birth: _____

For EpiPen® adrenaline (epinephrine) autoinjectors



Photo

Confirmed allergens:

Family/emergency contact name(s):

Work Ph: _____

Home Ph: _____

Mobile Ph: _____

Plan prepared by Dr or NP:

I hereby authorise medications specified on this plan to be administered according to the plan

Signed: _____

Date: _____

Action Plan due for review: _____

How to give EpiPen®



Form fist around EpiPen® and PULL OFF BLUE SAFETY RELEASE



Hold leg still and PLACE ORANGE END against outer mid-thigh (with or without clothing)



PUSH DOWN HARD until a click is heard or felt and hold in place for 10 seconds
REMOVE EpiPen® and gently massage injection site for 10 seconds

Instructions are also on the device label

SIGNS OF MILD TO MODERATE ALLERGIC REACTION

- Swelling of lips, face, eyes
- Hives or welts
- Tingling mouth
- Abdominal pain, vomiting (these are signs of anaphylaxis for insect allergy)

ACTION FOR MILD TO MODERATE ALLERGIC REACTION

- For insect allergy - flick out sting if visible
- For tick allergy - freeze dry tick and allow to drop off
- Stay with person and call for help
- Locate EpiPen® or EpiPen® Jr adrenaline autoinjector
- Give other medications (if prescribed).....
- Phone family/emergency contact

Mild to moderate allergic reactions (such as hives or swelling) may not always occur before anaphylaxis

WATCH FOR ANY ONE OF THE FOLLOWING SIGNS OF ANAPHYLAXIS (SEVERE ALLERGIC REACTION)

- Difficult/noisy breathing
- Swelling of tongue
- Swelling/tightness in throat
- Wheeze or persistent cough
- Difficulty talking and/or hoarse voice
- Persistent dizziness or collapse
- Pale and floppy (young children)

ACTION FOR ANAPHYLAXIS

1 Lay person flat - do NOT allow them to stand or walk

- If unconscious, place in recovery position
- If breathing is difficult allow them to sit



2 Give EpiPen® or EpiPen® Jr adrenaline autoinjector

3 Phone ambulance* - 000 (AU) or 111 (NZ)

4 Phone family/emergency contact

5 Further adrenaline doses may be given if no response after 5 minutes

6 Transfer* person to hospital for at least 4 hours of observation


If in doubt give adrenaline autoinjector

Commence CPR at any time if person is unresponsive and not breathing normally

ALWAYS give adrenaline autoinjector FIRST, and then asthma reliever puffer if someone with known asthma and allergy to food, insects or medication has SUDDEN BREATHING DIFFICULTY (including wheeze, persistent cough or hoarse voice) even if there are no skin symptoms

Asthma reliever medication prescribed: ☐ Y ☐ N

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ascia
Allergic Society of Children and Adolescent Allergists
www.allergy.org.au

ACTION PLAN FOR Anaphylaxis

Name: _____

Date of birth: _____

Photo

Confirmed allergens: _____

Family/emergency contact name(s):
 1. _____
 Mobile Ph: _____
 2. _____
 Mobile Ph: _____
 Plan prepared by doctor or nurse practitioner (np): _____

The treating doctor or np hereby authorises medications specified on this plan to be given according to the plan, as consented by the patient or parent/guardian.
 Whilst this plan does not expire, review is recommended by DD/MM/YY

Signed: _____
 Date: _____

For use with Anapen® adrenaline (epinephrine) autoinjectors

SIGNS OF MILD TO MODERATE ALLERGIC REACTION

- Swelling of lips, face, eyes
- Hives or welts
- Tingling mouth
- Abdominal pain, vomiting - these are signs of anaphylaxis for insect allergy

ACTION FOR MILD TO MODERATE ALLERGIC REACTION

- For insect allergy - flick out sting if visible
- For tick allergy ☐ seek medical help or ☐ freeze tick and let it drop off
- Stay with person, call for help and locate adrenaline autoinjector
- Give antihistamine (if prescribed) _____
- Phone family/emergency contact






Mild to moderate allergic reactions (such as hives or swelling) may not always occur before anaphylaxis

WATCH FOR ANY ONE OF THE FOLLOWING SIGNS OF ANAPHYLAXIS (SEVERE ALLERGIC REACTION)

- Difficult or noisy breathing
- Swelling of tongue
- Swelling or tightness in throat
- Wheeze or persistent cough
- Difficulty talking or hoarse voice
- Persistent dizziness or collapse
- Pale and floppy (young children)

ACTION FOR ANAPHYLAXIS

- LAY PERSON FLAT** - do NOT allow them to stand or walk
 - If unconscious or pregnant, place in recovery position - on left side if pregnant, as shown below
 - If breathing is difficult allow them to sit with legs outstretched
 - Hold young children flat, not upright


- GIVE ADRENALINE AUTOINJECTOR**
- Phone ambulance - 000 (AU) or 111 (NZ)**
- Phone family/emergency contact**
- Further adrenaline may be given if no response after 5 minutes**
- Transfer person to hospital for at least 4 hours of observation**

IF IN DOUBT GIVE ADRENALINE AUTOINJECTOR
 Commence CPR at any time if person is unresponsive and not breathing normally


ALWAYS GIVE ADRENALINE AUTOINJECTOR FIRST, and then asthma reliever puffer if someone with known asthma and allergy to food, insects or medication has **SUDDEN BREATHING DIFFICULTY** (including wheeze, persistent cough or hoarse voice) even if there are no skin symptoms

Asthma reliever medication prescribed: ☐ Y ☐ N


How to give Anapen®




1
PULL OFF BLACK NEEDLE SHIELD



2
PULL OFF GREY SAFETY CAP from red button



3
PLACE NEEDLE END FIRMLY against outer mid-thigh at 90° angle (with or without clothing)



4
PRESS RED BUTTON so it clicks and hold for 10 seconds. REMOVE Anapen®

Anapen® is prescribed as follows:

- Anapen® 150 Junior for children 7.5-20kg
- Anapen® 300 for children over 20kg and adults
- Anapen® 500 for children and adults over 50kg

© ASCIA 2021 This plan was developed as a medical document that can only be completed and signed by the patient's doctor or nurse practitioner and cannot be altered without their permission.