

SHEBOYGAN AREA SCHOOL DISTRICT

Staff Administration of Non-Student Specific Epinephrine standing protocol

In compliance with Wisconsin statute **118.2925** titled “**Life-threatening allergies in schools; use of epinephrine auto-injectors**,” the Sheboygan Area School District will have stock epinephrine located in each building’s school office, and a standing protocol from the Medical Director that details administration of an epinephrine auto-injector to a student or other person who is believed to be experiencing anaphylaxis.

Definition: Anaphylaxis is a sudden, severe allergic reaction that can involve more than one body system, can cause difficulty breathing, upper airway constriction, cardiovascular compromise; neurological changes or gastrointestinal symptoms and can cause death.

Common Triggers and/or extreme sensitivity to one or more of the following:

- Food - peanuts, tree nuts, soybeans, milk, fish, shellfish, wheat, certain fruits/vegetables
- Insect sting, usually bee or wasp
- Medication
- Exercise induced anaphylaxis after ingestion of certain foods (typically within 2 hours)
- Asthma triggers
- Latex

**Any SEVERE SYMPTOMS after suspected or known ingestion:
One or more of the following:**

LUNGS: Short of breath, wheeze, repetitive cough

HEART: Pale, blue, faint, weak pulse, dizzy, confused

THROAT: Tight, hoarse, trouble breathing/swallowing

MOUTH: Significant swelling (tongue and/or lips)

SKIN: Many hives over body, widespread redness

Or combination of symptoms from different body areas:

SKIN: Hives, itchy rashes, swelling (e.g., eyes, lips)

GUT: Repetitive vomiting, severe diarrhea, cramping pain

OTHER: Feeling something bad is about to happen, anxiety, or confusion

DO NOT DELAY TREATING ANAPHYLAXIS. When in doubt, give epinephrine. *Treating anaphylaxis in the first few minutes can save a life. Not all anaphylaxis has skin symptoms.*

If you suspect a person is having an anaphylactic reaction (see symptom list in above box) follow the building emergency response plan/protocol and:

1. IMMEDIATELY ADMINISTER EPINEPHRINE AUTOINJECTOR INTO UPPER OUTER THIGH PER STANDING ORDER:

- **GREEN** Epi-Pen Jr. is 0.15 mg – body weight less than 66 pounds (*if unsure of weight, use Epi-Pen Jr.® for 3k, 4k, Kg and 1st graders*) ****When approximating the dose by weight, it is better to give more epinephrine than less****
- **YELLOW** Epi-Pen 0.3 mg - body weight 66 pounds or more (*if unsure of weight, use Epi-Pen® for students in 2nd grader and above*)
- Inject into middle outer side of upper leg following direction on the Epi-Pen, note time and site of injection
- *Stay with student and monitor closely (expect side effects would include: anxiety, tremor, headache and dizziness).*

2. Designate a person to call Emergency Medical System (911) and request ambulance with epinephrine

3. Designate a person to notify, school administration and student’s emergency contact(s)



4. Stay with and observe student until EMS (ambulance) arrives.

- Maintain airway, monitor circulation, bring AED is available, start CPR as necessary.
- Do not have the student rise to an upright position.

- Consider lying on the back with legs elevated, but alternative positioning is needed for vomiting (side lying, head to side) or difficulty breathing (sitting).
- Observe for changes until EMS arrives.

5. IF NO IMPROVEMENT OR IF SYMPTOMS WORSEN IN ABOUT 5 OR MORE MINUTES, ADMINISTER A SECOND EPINEPHRINE DOSE IF SYMPTOMS PERSIST OR REOCCUR AND EMS HAS NOT YET ARRIVED.

- Provide EMS with identifying information, observed signs and symptoms, time epinephrine administered, and used epinephrine auto-injector to take with to the hospital
- **Transport to the Emergency Department via EMS even if symptoms seem to get better.**

After epinephrine administration:

1. Complete appropriate paperwork (incident report, Epinephrine auto-injector administration form, medication administration form, etc.)
2. Parents of student who suffered anaphylactic reaction and school staff involved in emergency response and those on the emergency response team should meet to debrief on the incident and make any necessary changes to policy or procedure or emergency action plan.

Tips for Administration of Epinephrine Auto-Injectors:

- When approximating the dose by weight, it is better to err with more epinephrine than less
- When giving through clothing avoid seams or lumps in clothing
- Be sure the student is being held securely during administration against movement of the leg
- While giving add pressure to the leg to help reach muscle
- Rub the site afterwards to help absorption
- After injection and removal of the pen from the leg, an orange colored needle guard will be visible. If this guard is not present, the medication was not successfully delivered. (Check to be sure the blue safety cap was removed, and try again)

Epinephrine Auto-Injectors Storage:

- Store in a safe and secure place known to trained staff in office or health room
- Store at room temperature (68°-77°)
- Expiration dates are never longer than 18 months (expired epinephrine starts to lose its potency) Notify school nurse of nearing expiration date.
- Epinephrine should be clear, without color and have no sediment

References:

- Food Allergy and Anaphylaxis Network. (2011). *Food Allergy Action Plan*. Available at: <http://www.foodallergy.org/files/FAAP.pdf>.
- Food Allergy and Anaphylaxis Network (FAAN). (2001). *School Guidelines for Managing Students With Food Allergies*. Available at: <http://www.foodallergy.org/school/guidelines.html>.
- National Association of School Nurses. (2011). *Suggested Nursing Protocol for Students without an Emergency Care Plan*. Available at: http://www.nasn.org/portals/0/resources/faat_no_ECP.pdf.
- Wisconsin State Legislature. (2013). 2013 WISCONSIN ACT 239. Available at: <https://docs.legis.wisconsin.gov/2013/related/acts/239>