

Food Allergy Action Plan

Student Information

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|--|--|------------------------------|
| Student name | Date of birth | Place Student's Picture Here |
| Weight | Asthma <input type="checkbox"/> Yes (higher risk for a severe reaction) <input type="checkbox"/> No | |
| Allergic to: _____ | | |
| Extremely reactive to the following foods: _____ | | |
| THEREFORE: <input type="checkbox"/> If checked, give epinephrine immediately for ANY symptoms if the allergen was likely eaten. <input type="checkbox"/> If checked, give epinephrine immediately if the allergen was definitely eaten, even if no symptoms are noted. | | |

Any SEVERE SYMPTOMS after suspected or known ingestion:

One or more of the following:

LUNG: Short of breath, wheeze, repetitive cough

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

THROAT: Tight, hoarse, trouble breathing/swallowing

MOUTH: Obstructive swelling (tongue and/or lips)

SKIN: Many hives over body

Or combination of symptoms from different body areas:

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

GUT: Vomiting, crampy pain



1. INJECT EPINEPHRINE IMMEDIATELY

2. Call 911
3. Begin monitoring (see box below)
4. Give additional medications:*
 - Antihistamine
 - Inhaler (bronchodilator) if asthma

*Antihistamines and inhalers/bronchodilators are not to be depended upon to treat a severe reaction (anaphylaxis). USE EPINEPHRINE.

MILD SYMPTOMS ONLY:

MOUTH: Itchy mouth

SKIN: A few hives around mouth/face, mild itch

GUT: Mild nausea/discomfort



1. GIVE ANTIHISTAMINE

2. Stay with student; alert healthcare professionals and parent
3. If symptoms progress (see above), USE EPINEPHRINE
4. Begin monitoring (see box below)

Medications/Doses

Epinephrine (brand and dose): _____

Antihistamine (brand and dose): _____

Other (e.g., inhaler-bronchodilator if asthmatic): _____

Monitoring
Stay with student; alert healthcare professionals and parent. Tell rescue squad epinephrine was given; request an ambulance with epinephrine. Note time when epinephrine was administered. A second dose of epinephrine can be given 5 minutes or more after the first if symptoms persist or recur. For a severe reaction, consider keeping student lying on back with legs raised. Treat student even if parents cannot be reached. See back/attached for autoinjection technique.

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|---------------------------|------|----------------------|------|
| Parent/Guardian Signature | Date | Prescriber Signature | Date |
|---------------------------|------|----------------------|------|