Lakewood School

Staff Administration of Non-Student Specific Epinephrine Policy and Procedure

Policy:

Any district employee may be authorized to administer epinephrine to anyone who is experiencing anaphylaxis and who

- Is willing to assume that responsibility
- Is authorized in writing by the school principal or his/her designee
- Has received Department of Public Instruction approved training, within four years, for the administration of epinephrine
- Has been sufficiently instructed by the school district's School Nurse:
 - i. In recognizing the signs and symptoms of anaphylaxis
 - ii. On the proper administration of epinephrine auto-injector
 - iii. On proper follow-up procedures following administration of epinephrine auto-injector
- Has successfully completed an annual return demonstration of administration of epinephrine auto-injector and has been deemed competent by the School Nurse.

Procedure:

Anaphylaxis is an allergic reaction that may be triggered by a food allergy, insect sting, or drug reaction. If a person with a known history of severe allergic reaction is exposed to a known allergen, activate emergency medical services as needed.

- A. Observe the patient for symptoms of shock or respiratory distress.
 - 1. Respirations: may be wheezy, labored, or absent
 - 2. Pulse: may be rapid, weak, or difficult to detect
 - 3. Color: may be pale, mottled, or cyanotic
 - 4. Skin: may be cool, moist, or clammy; urticaria (hives) may be present; nail bed capillary refill time may exceed two seconds
 - 5. Blood pressure: may be low or undetectable
 - 6. Other: stupor, agitated, restless, vomiting, diarrhea, headache, unconsciousness
- B. Monitor the airway, keeping it open. As needed, remove secretions/vomit and assist with ventilation.
- C. If patient is in shock and/or respiratory distress and if no other specific physician order is available, administer epinephrine as follows:

<u>Weight</u> <u>Administer</u>

33-66 lbs EpiPen Jr. (0.15 mg epinephrine)

Over 66 lbs EpiPen (0.3 mg epinephrine)---give adult dose generally

for 2[™] grade and above

NOTE: If unsure about weight and there is no MD order, give the adult dose. In an allergy emergency, too much epinephrine would be far less dangerous than too little. If the only Epi-Pen available is past the expiration date, it may be used as long as it is not discolored and does not have obvious precipitate.

CALL 911 IF NOT ALREADY DONE AND THEN CALL PARENTS.

- D. Administer CPR as needed
- E. Supportive care
 - 1. Lay patient flat, facing up (supine position); raise feet 8-12 inches.
 - 2. Keep patient warm, but not overheated.
 - 3. Do not administer any solid or fluid by mouth.
 - 4. If bee stinger is noted in skin, remove by gently scraping at skin level.
 - 5. Monitor patient closely, as sudden clinical deterioration can occur despite treatment.

After epinephrine administrations:

- 1. Complete appropriate paperwork (incident report, epinephrine administration report, medication administration form etc.).
- 2. Request permission from student's parent/guardian to send a copy of paperwork (epinephrine administration report, medication administration form, etc. to student's healthcare provider.
- 3. 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.