

# Recognizing and Responding To Life-Threatening Allergies

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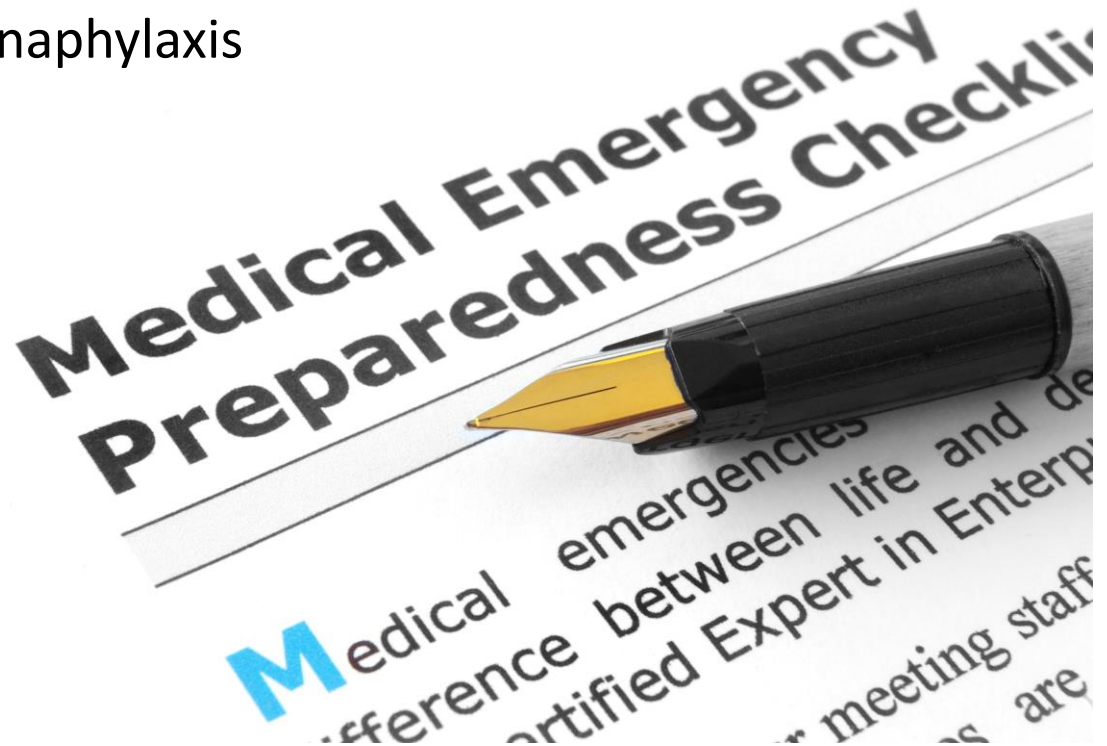


# Objectives



In this training, you will learn about:

- **Awareness** of Anaphylaxis
- How to **Recognize** Anaphylaxis
- How to **Respond** to Anaphylaxis



# Anaphylaxis is an **Emergency**



Anaphylaxis can occur within seconds or minutes of exposure to something you're allergic to.

Source: [Healthline.com](https://www.healthline.com)

**Anaphylaxis is a serious allergic reaction that is rapid in onset and can cause death.**

When exposed to an *allergen* (something they're allergic to) some people experience a potentially life-threatening reaction called **anaphylaxis**. As a result, their immune system releases chemicals that flood the body. This can lead to *anaphylactic shock*.

When your body goes into anaphylactic shock, your blood pressure suddenly drops and your airways narrow, possibly blocking normal breathing.

This condition is **dangerous**. If it isn't treated immediately, **it can result in serious complications and even be fatal.**

# Common Allergens

Exposure to an allergen may occur by **ingestion, contact/touch, or inhalation**. There are many potential common allergens found in the school environment.

All staff should be especially alert to **common allergens** such as:

- Insect bites – bees, wasps, hornets, fire ants
- Foods – peanuts, tree nuts, shellfish, fish, milk, soy, wheat, eggs
- Latex – balloons, gloves, bandages, pencil erasers, adhesive tape



Source: [WebMD – Common Allergy Triggers](#)

# Common Allergens



**Peanuts and tree nuts** are listed separately. Here's why:

- Some students may be allergic to **only tree nuts** (i.e., almonds/walnuts) and *OK to eat peanuts/peanut products*
- Some students may be allergic to **only peanuts and peanut products**, and *OK to eat tree nuts*
- Some students may be allergic to **both**
- **You should treat all academic institutions as “nut free” zones**



Source: [American College of Allergy, Asthma, & Immunology](#)

# IHP/ECP: Student History

As a substitute employee, your duties may allow you to be apprised of a particular student's **IHP (Individualized Health Plan)** or **ECP (Emergency Control Plan)** that references their life-threatening allergy potential.

The ECE center or school's staff should advise the substitute of any student(s) with a history of anaphylaxis and what to do in an emergency.

This could include the location of medication, the proper dosage, and other relevant details.

## QUESTIONS?

Contact the center/school nurse or administrator

## Who might need an IHP?

- Students with:
  - Asthma
  - Serious allergies
  - Chronic conditions
  - Physical disabilities
  - ADD/ADHD
  - Medication needs

Source: [Northwest Educational Service District 189](#)

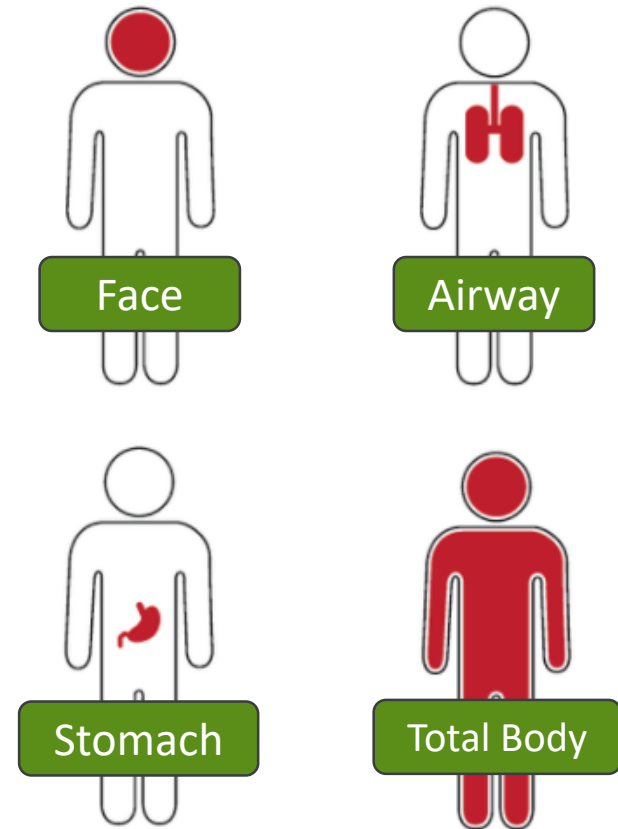
Source: [CDC Guidelines](#)

# Signs/Symptoms of Anaphylaxis

Sometimes, symptoms of anaphylaxis may appear in only one body system such as skin rash or lungs, while in others symptoms appear in several body systems. The symptoms can vary in severity based upon the individual and the amount of the allergen exposure.

The issue can **quickly become life-threatening** so it is critical to have awareness and understand how to manage an anaphylactic episode.

## Think F.A.S.T.



Source: [Allergy Aware \(Canada\)](#)

# Signs/Symptoms of Anaphylaxis (cont.)

Signs and symptoms of anaphylaxis may include any or several of the following and may require emergency treatment:

- Trouble breathing, chest tightness, hoarseness
- Hives or swelling, skin rash
- Swelling/itching/tingling of face, lips, mouth, tongue, throat
- Abdominal pain, nausea, vomiting, diarrhea
- Loss of consciousness
- Dizziness, fainting
- Changes in the students level of awareness
- Sense of impending doom, crying, or anxiety

Symptoms may develop immediately after allergen exposure, or they may be delayed.

Source: [American College of Allergy, Asthma, & Immunology](#)



# Epinephrine Administration

The administration of epinephrine should never be delayed.



Source: [U.S. National Library of Medicine](#)

**Epinephrine** is a medication that counteracts anaphylactic shock by relaxing the muscles in the airways and tightening blood vessels.

It is given by injection and may be effective for only about 15 minutes. For this reason, **911 is always contacted when epinephrine is given.**

- Preferred policy calls for a school or district employee to administer epinephrine and call 911.
- If there is no school employee or nurse support available, the substitute may be called upon to administer epinephrine.

# First Aid Response to Anaphylaxis

If you suspect anaphylaxis, do not leave the student unattended. Call for assistance based upon the center emergency response plan.

If you are not certain whether a student is experiencing anaphylaxis, **proceed as if they are to be safe.**

## MYTH:

You can predict anaphylaxis.

## FACT:

There is no real pattern to anaphylactic episodes. The seriousness of each episode depends on the **severity of the allergy, the amount of exposure, the way the person is exposed to the allergen, and other health conditions.**

## In an Emergency:

1. Evaluate whether appropriate center personnel are available to take over. Follow their direction.
2. Get help – call/intercom, office
3. In the absence of a licensed nurse or school staff, an epinephrine auto-injector (“epi pen”) may be administered by an employee who has completed training in recognizing the symptoms of anaphylactic shock and the correct method of administering the epinephrine auto-injector.

# Epinephrine Auto Injector (EAI)



Source: [Mayo Clinic](https://www.mayoclinic.org/epinephrine-auto-injector/epinephrine-auto-injector-overview/hw-20160126)

A device called an **Epinephrine auto-injector or EAI**, is a combined syringe and concealed needle that injects a single dose of medication when pressed against the thigh.

An EAI is a disposable, single use drug delivery system commonly available and typically familiar to any student who has a history of anaphylaxis. An EAI contains the proper dose of epinephrine to treat severe allergic reactions.

# Epinephrine Auto Injector (EAI)

Epinephrine auto-injectors are available in **two dosage strengths**.

- 0.15 mg (body weight 33-66 lbs)
- 0.30 mg (body weight 66+ lbs)

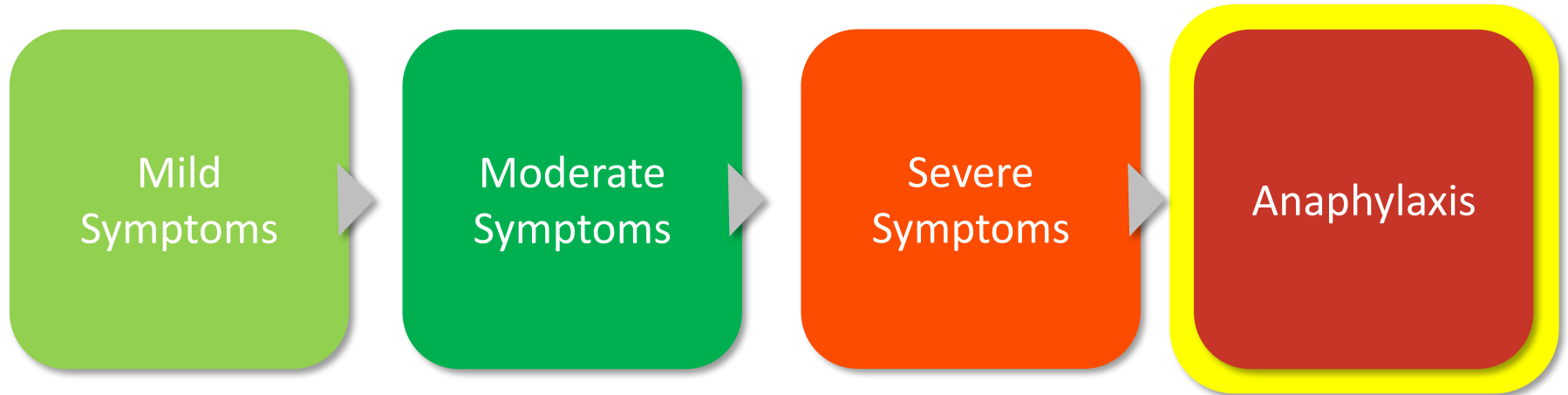
Source: [U.S. Nat'l Library of Medicine](#)



A student's individual health plan will identify the specific brand/dosage of EAI.

# Do Not Ignore Symptoms

Due to the unpredictability of reactions, **early symptoms of an allergic reaction should never be ignored**, especially if the student has suffered an anaphylactic reaction in the past.



# Responding to Anaphylaxis Emergencies

Many child care education centers and schools have specific policies and procedures for the prevention and management of anaphylaxis. As a substitute, you should be aware of these policies and abide by them.

**During an emergency if no school employees are available and if you have been trained according to state laws, including regulations, be ready to use an epinephrine auto-injector if needed.**



Source: [CDC Guidelines](#)

# Preventing Anaphylaxis



The best way to prevent anaphylaxis is to **avoid exposure to allergens**:

- Students should not share or trade food
- Look for and avoid insect nests
- Encourage and facilitate proper student hand washing
- Carefully read labels before using materials for classroom activities. For example, many potting soils contain peanut products.
- Be aware of latex products such as balloons or gloves



Source: [CDC Guidelines](#)