Leonard Independent School District

School Health Services

Managing Students with Life Threatening Allergies at Risk for Anaphylaxis

The Leonard Independent School District (LISD) is committed to providing educational opportunities to all students. No student shall, on the basis of a

Disability, be denied the opportunity to participate in any program or service the

District offers to all students. When a student who presents with any health care needs enrolls in LISD's schools, an appropriate health care plan is developed to serve the student, in addition to any other programs or plans that may also be developed to ensure the student receives a free appropriate education. The following information sets out the procedures that LISD follows in managing students with Life Threatening Allergies (LTA) in the schools. The information also follows Senate Bill 27 (2011, 82"d Legislative Session) which amended Chapter 38 of the Texas Education Code by adding Section 38.0151 and the guidelines developed by the state Commissioner of Health in consultation with the Ad Hoc Committee in the spring of 2012.

INTRODUCTION

*Anaphylaxis* is defined as "a serious allergic reaction that is rapid in onset and may cause death• (Simons, 2008). Anaphylaxis includes a wide range of symptoms that can occur in many combinations and is highly unpredictable. The most dangerous symptoms include breathing difficulties and a drop in blood pressure or shock. Common examples of potentially life threatening allergies are those to foods and stinging insects. Life-threatening allergic reactions may also occur to medications or latex rubber and in association with exercise. The Centers for Disease Control and Prevention recently reported an 18 percent increase in food allergies among school-aged children from 1997 to 2007. Current estimates state that between 1 in 13 (Gupta, 2011)) and 1 in 25 children are now affected with 40 percent reporting a history of severe reaction (CDC,

2012). There is no cure for food allergies. Strict avoidance of food allergens and early recognition and management of allergic reactions are important measures

To prevent serious health consequences (U.S. Food and Drug Administration,

2008).Children spend up to 50 percent of their waking hours in school, and foods

Containing allergens are commonly found in schools. Thus, the likelihood of allergic reactions occurring in schools is high (Sheetz, 2004). Effective management of an individual's LTA's is crucial. The foundation for the management of a student with LTA's enrolled at LISD is the student's Individual Health Plan (IHP) that is developed in collaboration with the student, parent, student's physician, school nurse and other LISD personnel, as appropriate.

The IHP includes the routine treatment and emergency care that will be provided for the student.

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Education is the key in identifying and supporting students with life-threatening allergies in the school setting. LISD provides training for staff to ensure those employees who work with the student understand the student's condition and how to provide routine treatment as well as emergency procedures.

Training

A training program has been developed to train staff according to the level of contact the employee is likely to have with the student with an LTA, The training is consistent with the concepts set forth in relevant publications, including, the *Texas Guide to School Health Programs,* published by the Texas Department of State Health Services, and the Food Allergy & Anaphylaxis Network.

• Parent Information on the LISD website

• Allergy and Anaphylaxis Posters will be placed in all cafeteria areas

• Specific Training Curriculum

1. Awareness Training opportunity will be provided to all staff on an annual basis at the beginning of the year. Awareness training provides general information on common causes of allergic emergencies, preventative measures, and signs and symptoms of an allergic emergency to ensure all LISD staff has an opportunity to become familiar with the LTA's. The training is offered via a power point presentation e-mailed to the employees titled *"Life Threatening Allergies-including food-How to recognize and care for children with severe allergies at risk for anaphylaxis"*

2. Comprehensive Training will be provided at least annually to the staff that has regular contact with the student with the LTA. LTA training provides the participants with information about the most common allergens, the hazards related to the use of food for instructional purposes, and the importance of environmental controls in protecting the health of students at risk for allergy related anaphylaxis. The training will also provide information on how to respond when a child exhibits the signs and symptoms of an allergic reaction to food.

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Provide information on implementing the LTA Medical Management Plan/IHP and Emergency Action Form (EAF), including the skills needed in administration of epinephrine, where the epinephrine is located and notifying the local EMS utilizing the school's emergency response policy and procedures. Written training materials will be provided and the Epinephrine Administration Skills Check Form shall be kept in the clinic medication binder as documentation of training.

Additional training is provided at any time that it is needed, when a change in staff occurs, or when a new student with an LTA enrolls on a campus. Ongoing monitoring of the training will occur to assure that sufficient personnel are trained in the care of the students with LTA's.

Treatment of Anaphylaxis

Epinephrine is the first-line treatment in cases of anaphylaxis. Other medications have a delayed onset of action. Anaphylaxis can occur immediately or up to two hours following exposure to an allergen. In approximately one third of anaphylactic reactions, the initial symptoms are followed by a delayed wave of symptoms two to four hours later. This combination of an early phase of symptoms followed by a late phase of symptoms is defined as a biphasic reaction. While initial symptoms respond to epinephrine, the delayed biphasic reaction may not respond to epinephrine and may not be prevented by steroids. Therefore, it is imperative that following the administration of epinephrine, the student be transported by emergency medical services (EMS) to the nearest hospital emergency department even if the symptoms appear to have resolved. Because the risk of death or serious disability from anaphylaxis itself usually outweighs other concerns, existing studies clearly favor the benefit of epinephrine administration in most situations. There are no medical conditions which absolutely prohibit the use of epinephrine when anaphylaxis occurs

(Boyce 2010).

If an emergency arises for a student with an LTA while the primary campus nurse is not present, the following steps will occur:

• Call a campus staff member who has been trained to provide immediate emergency Interventions as described in the student's IHP. If the student appears to be in a life-threatening situation, call 911.

• Call the parents.

• Notify the campus administrator.

The IHP will include the names and telephone/cell/pager numbers for designated trained personnel, the alternate trained personnel, school

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Nurse and the parent(s) contact numbers. Appropriate staff, as designated by the school nurse, shall be given Information on the individual student's IHP.

Identification of Students with Allergy at Risk for Anaphylaxis

Due to an increase in prevalence of allergies and the potential for an allergic reaction to become more life-threatening, information needs to be shared with the school in order to promote safety for children with allergies that are at-risk for anaphylaxis. It is important for parents to provide accurate and current health information when requested, in order to assist schools in obtaining information necessary to care for the student.

Texas Education Code Chapter 25,Section 25.0022 states that upon enrollment of a child in a public school, a school district shall request, by providing a form or otherwise, that a parent or other person with legal control of the child under court order:

1. Disclose whether the child has a food allergy or a severe food allergy that

In the judgment of the parent or other person with legal control, should be disclosed to the district to enable the district to take necessary precautions regarding the child's safety, and

2. Specify the food to which the child is allergic and the nature of the allergic reaction.

*The parent/guardian is given* the *opportunity to provide LISD with this information* on the *Food Allergy Form included in the school packet upon enrollment and should* be *completed* by the parent *upon enrollment and annually.*

DEVELOPING THE INDIVIDUAL HEALTH PLAN FOR A STUDENT

When the parent notifies the campus that a student with an LTA will be in attendance at that campus, the nurse will:

• Discuss the student's health status and management of allergy in the school.

• Discuss the level of care the parent anticipates the student will need at school.

• Discuss medications and supplies the parent will need to provide

the school.

• Request that the parent obtain appropriate information/orders from

The student's physician, concerning treatment of the student with LTA's care at school and provide parental consent for the school to provide the required treatment. The physician's form will need to specify allergen and treatment needed. (Reference: LISD LTA forms)

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When information from the student's physician is obtained, the school nurse and other appropriate school personnel will collaborate with the parent and student to review the information and develop specific healthcare information for the student's Individual Healthcare Plan (IHP). The IHP developed for the student will include all information needed to ensure the students LTA is appropriately managed at school. At a minimum, the IHP will include:

• The physician's written authorization for treatment and description of the treatment the student will receive to manage his or her LTA at school, including the procedure to follow to ensure continuation of all the services required by the plan

• Emergency administration and dosages of epinephrine and /or antihistamine

• Specify the allergen and a description of past reactions

• List the student's level of independent self-care

• Indication whether or not the student has asthma

• Location of emergency supplies

• Accommodations the student may require, such as things student may not be exposed to

• Name, location and telephone contact numbers of an alternative nurse or designated trained personnel and the parent(s).

• Description of the protocol for contacting the parent and the EMS

System in the event of an emergency

• Any other information that must be considered to ensure consistent provision of routine care called for in the plan and the continuation of services in the event of an emergency

• List of persons who will receive (or have received) the training provided to the staff that will be In contact with the student. The school nurse will provide and/or coordinate education and training for school personnel. (Refer to training section above)

• The nurse will refer the student to the Campus committee to determine whether the student is eligible for 504 services, or should be referred to special student services for assessment for eligibility for special education services, as needed.

Reducing the Risk of Exposure through *Environmental Controls*

Protecting students from exposure to allergens to which they are sensitive is the most important way to prevent life-threatening anaphylaxis. Implementing appropriate environmental controls can help minimize risk of exposure to an allergen. Roles and Responsibilities related to students, families and schools are provided on the following pages.

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Life Threatening Allergies (LTA) Actions for Parents or Guardian

In promoting a safe school environment for children with Life Threatening Allergies (at-risk for anaphylaxis) students, parents, and school personnel should work as a team in identifying students at-risk for anaphylaxis, reducing the risk or exposure to food/insect/ latex allergens and to react quickly should an exposure or allergic reaction occur.

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|  | Notify the school nurse that your child has been diagnosed with a Life threatening allergy (LTA)  when the student enrolls in schoolor is newly diagnosed wi1h the disease. |
|  | Provide accurate and current emergency contact information and update when needed. |
|  | Provide The Life Threatening Allergy Plan or similar form from your physician to the school  Nurse signed by a physician.  Collaborate with the campus nurse by providing the Life Threatening Allergy Plan, to review the medical orders(provided by the physician or healthcare provider) and discuss  accommodations the child with need throughout the school day, including  • the Classroom, the cafeteria,  • in after-school programs sponsored by the school, during school-sponsored activities,  • On the school bus |
|  | If necessary, attend and participate in the initial and annual school meetings to discuss implementing the students life Threatening Allergy Management & Treatment Plan/Individual Health Plan/ Emergency Action Form (LTA, IHP, EAF) to review medical accommodations and educational aids or plans the student may need. |
|  | Provide specific Information about your child's LTA and performance of allergy related task(s)  At home to the school nurse. |
|  | Permit sharing of medical information necessary for the students safety between the school  and the students personal health care providers. |
|  | Inform school staff of any changes in the student’s health status. |
|  | Provide all supplies and equipment necessary for care of your child's LTA including equipment, supplies for administration of medication, nebulizer tubing, inhaler, Epi-Pen, and antihistamine. Replenish supplies upon request from the school. Medications must be properly labeled and replaced after use or upon expiration. |
|  | Provide and maintain all supplies and equipment necessary to accommodate the students long-term (72 hours) in case of an emergency. |
|  | Inform appropriate school staff ( principal, teacher, coaches, and other) when the student plans to participate in  school-sponsored activities that take place before or after school or field trips that you will not be attending so that  health care coverage can be coordinated to ensure the health and safety of the student with a Life Threatening Allergy |
|  | Educate the child in the self-management of their food/allergen including:  • Safe and unsafe food  • Strategies for avoiding exposure to unsafe food/allergen  • Recognize the first symptoms of allergic anaphylactic reactions  • How to communicate clearly as soon as he/she feels a reaction is starting.  • If age appropriate and doctor prescribed, the importance of carrying and  Administrating their personal asthma and anaphylaxis medications as prescribed.  • Avoid sharing or trading snacks, lunches, or drinks•  • Request Ingredient information for any food offered. If food is not labeled or if the  child is unsure of the Ingredients, the child should politely decline the food offered  • Understand the importance of hand washing before and after eating |
|  | Consider sending a box of safe snacks. |
|  | Review policies/procedures with the school staff, the child's physician, and the child (If age  appropriate) after a reaction has occurred. |
|  | Report teasing, bullying and threats to an adult authority. |

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Life Threatening Allergies (LTA) Actions for Students

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|  | Participate in the school meeting to discuss your Life Threatening Allergy (LTA),Individual Health Plan (IHP), Emergency Action Form (EAF) or other education plan, as appropriate |
|  | Recognize the first symptoms of an allergic/anaphylactic reaction |
|  | Inform an adult as soon as an accidental exposure occurs or symptoms appear |
|  | Avoid environmental triggers, and sharing or trading snacks, lunches or drinks |
|  | Be proactive in the care and management of the environmental/food  allergies/reactions (age appropriate level)  • Should not eat anything with unknown ingredients or known to contain any allergen  • Ask about Ingredients for all food offered. If unsure that the food is allergen-free, politely decline. Do NOT take or eat the food.  • Wash hands before and after eating. |
|  | Know where your epinephrine auto-injector is kept and who has access to the  epinephrine auto-injector(s} |
|  | If age appropriate & physician ordered self carry epinephrine, complete training  and sign Leonard ISD self carry form with campus nurse  • Knows signs & symptoms off Life Threatening Allergy  • Understands safe storage of medication/not sharing with students  • Able to self administer epinephrine or communicate to adult that they  need it |
|  | Communicate with campus nurse and teacher to assist in identifying issues  related to the management of the allergy in school |

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Life Threatening Allergies (LTA) Responsibility of School Nurse

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|  | Prior to entry into school (or for a student who is already in school, immediately after the diagnosis of a life-threatening allergic condition), Send Life Threatening Allergy forms to parents and meet with parents/guardian and develop an IHP.  and meet with the studenfs parents/guardian and develop an IHP. |
|  | Conduct annual training and education to appropriate staff regarding students with life threatening allergens, symptoms, risk reduction procedures, emergency procedures, how to administer the epinephrine auto-injector, and ensuring that a student suspected of having an allergic reaction is accompanied by an adult. |
|  | Familiarize teachers with the LTA plan EAF, IHP of their students. Other staff members who have contact with the students should be familiar with their LTA plan EAF, IHP ‘s and be able to Intervene if needed. A copy of the LTA plan should be placed In the substitute teacher folder.\*\* |
|  | Remind parents to review the LTA plan/EAF, symptoms and emergency procedures with their child. |
|  | Provide information about students with life-threatening allergies to all staff on a need-to-know  basis. |
|  | Educate new personnel and substitute personnel as necessary. |
|  | Track in-service attendance of all involved to assure they have been trained. |
|  | Introduce yourself to the student and show him/her how to get to the school office. |
|  | Post districts emergency protocol. Post location of auto-injectors. Auto-Injectors should be placed In an accessible, secure and unlocked location durlng the school day. |
|  | Periodically or at least annually, check medications for expiration dates and notify parents to  obtain new medications. |
|  | Discuss with parents about appropriate self carry epinephrine protocol. |
|  | Review the LTA plan/EAF/IHP annually. New physician's orders are required at the beginning of  each school year or upon students entrv into Leonard ISD. |
|  | Make sure there is a contingency plan in place in the case the school nurse is absent. |
|  | Meet with parents on a regular basis to discuss issues related to plan implementation. |
|  | Health education:  • Provide health education to the allergic student as needed.  • Collaborate with coordinated campus administrator and classroom teachers to ensure  allergy education is provided to students |
|  | Assure that local EMS has epinephrine and anaphylaxis |
|  | Send communication home to parents that a child in the classroom has an LTA and list  precautions and guidelines to follow *if requested by parent In writing.* |
|  | Post anaphylaxis posters in the school classrooms/cafeteria/nurse's office. |
|  | Collaborate with cafeteria manager and administration In establishing an “Allergen Free" table(s)  in the cafeteria near a door or window. |
|  | Collaborate with custodial staff on appropriate cleaning measures needed in allergen  classrooms and cafeteria. |
|  | Communicate with local EMS about the location of the student and type of allergy. |
|  | Consider implementing a periodic anaphylaxis drill as part of a refresher course. |
|  | Coordinate and collaborate with the planning for a student’s re-entry into school after having an anaphylaxis reaction. |

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Responsibility of the Food Service Manager

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|  | Review the legal protections for students with life-threatening allergies and ensure that students with food allergies that participate in the federally-funded school meals programs are given safe food items as outlined by the physician’s signed statement. |  |
|  | Read all food labels and recheck routinely for potential food allergens. | |
|  | Train all food service staff and their substitutes to read product food labels and  recognize food allergens. | |
|  | Maintain contact information for manufacturers of food products (Consumer  Hotline) | |
|  | Review and follow sound food handling practices to avoid cross-contamination with potential food allergens. | |
|  | Strictly follow cleaning and sanitation protocol to avoid cross-contamination. | |
|  | Create specific areas that are allergen safe, such as dedicated table/seating areas *if requested by parent.* | |
|  | Post allergy anaphylaxis in cafeteria | |
|  | After receiving notice from healthcare provider, make appropriate substitutions or modifications for meals served to students with food allergies. | |
|  | Plan ahead to have safe meals for field trips, as necessary | |
|  | Provide advance copies of the menu to parents/guardians of students with  food allergy, and notification if menu changes. Consider how to provide  specific ingredient lists to parents upon request. | |
|  | Take all complaints seriously for any student with life-threatening food allergies | |

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Responsibility of Coaches and other on-site Persons in charge of conducting School sponsored Activities

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|  | Conduct the school sponsored activity in accordance with school policies and procedures regarding life threatening allergies. |
|  | Review with campus nurse and maintain a copy (easily accessible) of the Life  Threatening Allergy Management & Treatment Plan/Individual Health Plan/ Emergency Action Form (LTA, IHP EAF) of the student |
|  | Make certain that an emergency communication device is always present and able to call 911 |
|  | Assure that one to two people present are trained in emergency response and able to administer epinephrine auto-injectors |
|  | If off site-maintain auto-injectors in a secure, unlocked yet easily accessible  location where trained school staff can quickly access them and the student's  LTA, IHP, EAF |
|  | Clearly identify school personnel during off site event(s) who will be responsible for keeping the auto-injector(s) and LTA,IHP,EAF for student(s)with life threatening allergies |
|  | If for safety reasons medical alert identification needs to be removed during  specific activities, the student should be reminded to place the identification  back on immediately after the activity is complete. If it is not required to be removed, medic alert jewelry can be covered utilizing tape or wrist bands. |

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Life Threatening Allergies (LTA)-Classroom Responsibilities

Food and Insect allergies anaphylaxis can be life threatening. The risk of accidental exposure to foods or other allergens can be reduced in the school setting if schools work with students, parents and physicians to minimize the risks and provide a safe educational environment for allergic students. It’s Important to understand the precautions to take to keep students as safe as possible. Accidental exposure is the biggest risk to these students. It’s Important to work together as a team to minimize risks and to provide a safe environment

Exposure Is anytime a student Ingests (eats) or touches the allergen or has an insect bite/sting from a known allergen.

In the case of peanut allergies, the smell of peanuts alone can be enough to cause a reaction. FOOD PREPARED IN CONTAINERS OR WITH UTENSILS THAT HAVE PREVIOUSLY BEEN USED WITH THE ALLERGEN PRODUCT CAN CAUSE A REACTION!!

Allergy Management

General:

Notify School Nurse if a child diagnosed with a life threatening allergy is brought to your attention. A physician’s note diagnosing the allergen and type of exposure causing the allergy must be on file with the school nurse and campus administration.

Anaphylactic medication will be stored in the campus office.

\*Student may be allowed to carry their own epinephrine, if age appropriate ONLY after approval from the student’s physician, parent and the school nurse. The appropriate LISD health forms must be on file in the nurse’s office and school office.

Review the LTA management plan, IHP & EAF of any students in your classroom with life threatening allergies. Assist in developing a communication plan with the campus office and/or school nurse.

Participate in Life Threatening Allergy/Epinephrine training.

Be sure volunteers, student’s teachers, aides, specialists, and substitute teachers are informed of the child’s allergy and take necessary safeguards.

Leave information in an organized, prominent and accessible format for substitute teachers and other appropriate staff including cafeteria monitors.

Educate classmates to avoid endangering, isolating, stigmatizing or harassing students with allergies. Be aware of how the student with allergies is being treated: enforce school rules on bullying and threats.

Work with the school nurse to educate other parents about the presence and needs of students with life threatening allergies in the classroom.

Life Threatening Allergies (LTA)-Classroom Responsibilities

(Continued)

Inform parents and school nurse of any school events where food will be served.

Consider modifying the curriculum to ensure classroom learning is not impacted, reference 504 plans as applicable.

Do not allow students to eat food (except snacks) unless designated to be consumed in curriculum.

Ensure that a student suspected of having an allergic reaction is accompanied by an adult. Do not put a student on the bus or allow walking home alone if there are any signs or symptoms of an allergic reaction.

Snack Time, Lunch Time

Assist in establishing procedures to ensure that the student with life threatening food allergies eats only what she/he brings from home and/or is known to be safe.

Encourage hand washing before and after snacks and lunch. Be aware that alcohol based hand sanitizers are NOT effective in removing allergens from hands.

Prohibit students from sharing or trading snacks.

\*Do not allow a student who inadvertently brings a restricted food to the classroom to eat that

Snack in the classroom. This student will have to eat the restricted food in a designated area or

Bring the snack home.

Encourage parents/guardians to send a box of \*safe\* snacks for their child with a food allergy.

Assist with eliminating or limiting animals and/or foods in the classroom which may cause a Life-

Threatening reaction to a student in the class. Obtain written request from parent. If a letter to the classroom is requested this letter needs to come from the school nurse or campus administrator.

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Life Threatening Allergies (LTA) Classroom Responsibilities

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|  | When necessary, avoid cross contamination by wiping down eating surfaces before and after eating, (Refer to student’s IHP).  Students IHP) |
|  | If a classroom party or after-school activity will be held In your classroom, notify the administration the day before to allow arrangements for the custodians to wash tables before the next day.  arrange custodian to wash tables Prior to the next day. |
|  | Consider eliminating or limiting animals and/or foods In the classroom (e.g., arts and crafts, counting, science projects, cooking, or other projects} which may cause a life-threatening reaction to a student in the classroom (Reference party recommendations)  • Welcome parental involvement in organizing class parties and special events. Consider non-food treats.  • Use non-food items such as stickers, pencils etc, as rewards instead of foods• |
|  | Assure only students with the designated allergy eat at allergen free table, *request on file in campus office* |
|  | Class parties -  Administrator, teacher, and nurse MUST INVOLVE LTA PARENT FROM THE BEGINNING WHEN PLANNING PARTY, this cannot be left to the discretion of the room mom  • Option 1·Have children eat the snack brought from home as they do every day ( peanut/ tree nut classrooms would be the same restrictions on this day) and have a special non edible craft project for the party treat  • Option 2-Serve all party food in common area-arrange for allergen free food as much as possible,  Working with mothers of LTA (develop classroom letters). |

Field Trips

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|  | Collaborate with the school nurse prior to planning a field trip.  • Notify school nurse of all off campus activities at least 2 weeks in advance. |
|  | Ensure Life threatening Allergy plan and epinephrine injectors are taken on all field trips and outings. |
|  | Review plans for field trips; avoid high risk places. Consider eating situations on field trip and plan for reduction of exposure to a student’s life threatening food/insect allergy. |
|  | Collaborate with parents of students with life threatening allergies when planning field trips.  • Invite parents of students at risk for anaphylaxis to accompany their child on school trips, and/or to act as chaperone. However, the student’s safety or attendance must not be conditioned on the parent’s presence. |
|  | One to two people on the field trip should be trained in  • Recognizing signs and symptoms of Life Threatening allergic reactions•  • Use of epinephrine auto-Injector  • Emergency procedures Know 911 Procedures |

Sensitivity and Bullying

An allergic student may receive threats and harassment related to his/her condition. According to the Texas Education Code, Chapter 37 Section 37.0832, school policy should address bullying on the school grounds, at school sponsored functions, and in school vehicles for all students. Remind students and staff that bullying or teasing students will not be tolerated.

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Responsibility of the Transportation Department

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|  | Collaborate with health services on providing and attending a training for all schoolbus drivers on identifying the symptoms of life-threatening allergies |
|  | Provide a functioning communication device for use on the bus or during  transports |
|  | Know how to contact local EMS |
|  | Maintain policy of no consumption of food or drinks on the buses |

Responsibility of the Custodial Staff

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|  | Participate in trainings on how to clean surfaces of food allergens |
|  | Clean desks, table and chairs and other surfaces with special attention to  designated areas for students with food allergies at risk for anaphylaxis |
|  | Clean "Allergen Free" table before and after lunch with appropriate cleaner, per custodial services protocol. |

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LTA-Return to School after a Reaction Checklist

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|  | Obtain as much accurate information as possible about the allergic reaction. Helpful information might include:  • Items ingested (food drink, OTC medications or Rx medications)  • Any insect stings or bite  • Timing from ingestion to symptoms  • Type of symptoms  • Exercise involved  • Time and response of medications that were given |
|  | Identify those who were involved in the medical intervention and those who witnessed  the event. |
|  | Meet with the staff or parent/guardian to discuss what was seen and dispel any  rumors. |
|  | Provide factual information. Although the school may want to discuss this with the parents, factual information that does not identify the individual student can be provided to the school community without parental permission (i.e., a letter from the principalto parents/guardians and teachers that doesn't disclose identity but reassures them the crisis is over if appropriate). |
|  | If an allergic reaction Is thought to be from a food provided by the school foodservice,  request assistance of the Food Service Director to ascertain what potential food Item  was served/consumed. Review food labels from Food Service Director and staff. |
|  | Agree on a plan to disseminate factual information to and review knowledge about  food allergies with schoolmates who witnessed, or were Involved in the allergic reaction, after both the parent/guardian and the student consent. |
|  | Explanations shall be age appropriate. |
|  | Review, amend or update Or signature/new orders, student's LTA plan/EAF, IHP  And for 504 Plan to address any changes that need to be made. If a student does not have an EAF IHP and/or 504 Plan·then consider Initiating one. |
|  | Review what changes need to be made to prevent another reaction. |

Student Name. Date of Anaphylaxis Event------- Reviewed with Teacher(&) (date)----

Reviewed with Food Services (date) \_

Reviewed with Student (date)----

Campus Nurse Signature--. \_ Date \_

Administrators Signature------------ Date--------- Parent Signature:........ Date---------