



School:
Emergency Healthcare Plan- Anaphylaxis
School Year – 2023-2024

Student: TEST, Student

Date:

Emergency contact:

Birthdate: 09/09/2010

Grade/Teacher:

Student Specific Emergency/Diagnosis: **Anaphylaxis**

If you see this	Do this
AUVI-Q KEPT IN	
<ol style="list-style-type: none"> 1. Known or suspected exposure to allergen of _____. 2. Symptoms such as: <ul style="list-style-type: none"> *Mouth: itching and swelling of lips, tongue or mouth *Throat: itching and or tightness in throat, hoarseness *Skin: hives, itchy rash; swelling of face, around eyes, or extremities *Gut: nausea, abdominal cramps, vomiting, and/or diarrhea *Lung: shortness of breath, repetitive coughing or wheezing, nasal discharge *Heart: thread, pulse, passing out 	<ol style="list-style-type: none"> 1. Administer Auvi-Q. <ul style="list-style-type: none"> • To administer: • Position child to access thigh area • Pull from outer case and remove red safety guard. • Place black end of Auvi-Q on the thigh, at a right angle to the leg. • Push firmly against outer thigh so it “clicks” and hold for a count of 2. • Massage injection site for 10 seconds. 2. Call 911 3. Call eCare 4. Remain with student 5. Monitor respiratory status and vitals per nurse direction 6. Be prepared to administer second dose as directed 7. Allow a position of comfort
<ol style="list-style-type: none"> 1. If unresponsive and not breathing 	<ol style="list-style-type: none"> 2. Begin CPR 3. Call 911

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	4. Get an AED 5. Call eCare
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