

Non-Food Allergy Action Plan

Form provided by ND Child Care Resource & Referral Health Consultant Team

This form should be completed by healthcare provider.

Name of child: _____

Date of Birth: _____ Age: _____ Weight: _____ lbs.

Allergy to: _____

Reactions: (Check all that apply)

Mild Reaction/Symptoms (itchy mouth, hives, itch, mild nausea/discomfort, etc)

Severe Reaction/Symptoms

(shortness of breath, wheeze, cough, pale, blue, faint, weak pulse, dizzy, confused, hoarse, trouble breathing/swallowing, swelling of tongue/lips/eyes, severe hives, itchy rash, vomiting, crampy pain)

A child with asthma is at higher risk for a severe allergic reaction.

Does this child have asthma?

No Yes (if Yes, complete *Asthma Action Plan* found on ndchildcare.org website)

Treatment for Mild Reaction/Symptoms

1. Give medication. Name of medication _____ Dose _____ Route _____
2. Contact the parent or emergency contact person.
3. Stay with child, keep child calm, monitor symptoms until parent arrives.
4. Watch child for more severe reactions/symptoms.

Treatment for Severe Reaction/Symptoms

Can cause life-threatening reaction. Do not hesitate to give Epinephrine!

1. Inject epinephrine in thigh using (Check One)

Adrenaclick (0.3 mg) Adrenaclick (0.15mg) EpiPen Jr (0.15 mg)
 Twinject (0.15 mg) Twinject (0.3mg) EpiPen (0.3mg)

2. Call 911 or rescue squad immediately (before calling parent or emergency contact).
Epinephrine only lasts 20-30 minutes. 911/Rescue should ALWAYS be called if epinephrine is given.
3. Contact parents or emergency contact person. If unavailable, staff member should accompany child to hospital until parent or emergency contact arrives.

Stay with child. Tell rescue squad epinephrine was given; request an ambulance with epinephrine. Note time epinephrine was given. A second dose of epinephrine can be given 5 minutes or more after the first if symptoms persist or recur. For this reason, it is best practice to have 2 epinephrine pens at the child care program. For a severe reaction, consider keeping child lying on back with legs raised.

REMINDER – Child care providers/staff should be trained in administering epinephrine. Personnel must take epinephrine pen on field trips. Phone should be close by. Keep pen at room temperature. DO NOT freeze, refrigerate or keep in extreme heat.

Emergency Contacts:

Name	Relationship	Phone: home / work / cell

Comments: _____

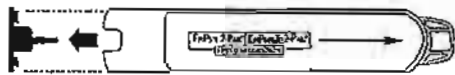
Parent / guardian signature: _____ Date: _____

Healthcare Provider signature: _____ Date: _____

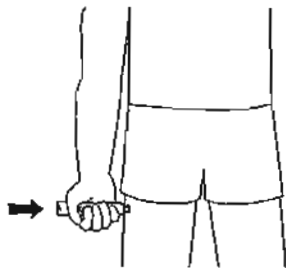
PLEASE CIRCLE TYPE OF KIT CHILD HAS AT CHILD CARE

EPIPEN Auto-Injector and EPIPEN Jr Auto-Injector Directions

- First, remove the EPIPEN Auto-Injector from the plastic carrying case
- Pull off the blue safety release cap



- Hold orange tip near outer thigh (always apply to thigh)



- Swing and firmly push orange tip against outer thigh. Hold on thigh for approximately 10 seconds. Remove the EPIPEN Auto-Injector and massage the area for 10 more seconds



DEP and the Day logo, EpiPen®, EpiPen 2-Pak®, and EpiPen Jr 2-Pak® are registered trademarks of Day Pharma, L.P.

Twinject® 0.3 mg and Twinject® 0.15 mg Directions



Remove caps labeled "1" and "2."

Place rounded tip against outer thigh, press down hard until needle penetrates. Hold for 10 seconds, then remove.



SECOND DOSE ADMINISTRATION:
If symptoms don't improve after 10 minutes, administer second dose:

Unscrew rounded tip. Pull syringe from barrel by holding blue collar at needle base.



Slide yellow collar off plunger.

Put needle into thigh through skin, push plunger down all the way, and remove.



Adrenaclick™ 0.3 mg and Adrenaclick™ 0.15 mg Directions



Remove GREY caps labeled "1" and "2."



Place RED rounded tip against outer thigh, press down hard until needle penetrates. Hold for 10 seconds, then remove.

PLEASE CIRCLE TYPE OF KIT CHILD HAS AT CHILD CARE

An allergy response kit should contain at least two doses of epinephrine, other medications as noted by the child's physician, and a copy of the Allergy Action Plan

A kit must accompany the child if he/she is off school grounds (i.e., field trip).

Sources:
FAAN (www.foodallergy.org)
Food Allergy & Anaphylaxis Network
American Academy and Allergy Asthma and Immunology www.aaaai.org
CCR&R health consultants

Revised 5/11

NORTH DAKOTA
CCR&R
CHILD CARE RESOURCE & REFERRAL

Child Care Resource & Referral is a program of Lutheran Social Services in western North Dakota and Lakes and Prairies Community Action Partnership in eastern North Dakota