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ALLERGY MANAGEMENT POLICY

Divine Redeemer Lutheran School is committed to providing a safe and nurturing environment for students. Divine Redeemer understands the increasing prevalence of life threatening allergies among school populations. Recognizing that the risk of accidental exposure to allergens can be reduced in the school setting, Divine Redeemer is committed to working in cooperation with parents, students, and physicians, to minimize risks and provide a safe educational environment for all students. The focus of allergy management shall be on prevention, education, awareness, communication and emergency response.

The goals for allergy management include:

1. To define a formal process for identifying, managing, and ensuring continuity of care for students with life-threatening allergies at Divine Redeemer.
2. To maintain the health and protect the safety of children who have life-threatening allergies.
3. To ensure that interventions and individual health care plans for students with life-threatening allergies are based on medically accurate information.

LIFE-THREATENING ALLERGY GUIDELINES

BACKGROUND

Allergic food reactions can span a wide range of severity of symptoms. The most severe and potentially life-threatening reaction is anaphylaxis. This protocol is to be used for students who are at risk for anaphylaxis. The incidence of severe allergic reactions has been rising at an alarming rate, especially with regard to food. Other common causes of anaphylaxis include, allergies to latex, medications, and insect stings.

PATHOPHYSIOLOGY AND TREATMENT

Anaphylaxis refers to a collection of symptoms affecting multiple systems in the body, the most dangerous of which are breathing difficulties and a drop in blood pressure or shock, which are potentially fatal. The foods that most commonly cause anaphylaxis are peanuts, tree nuts, shellfish, milk, wheat, soy, fish and eggs. These severe allergic reactions can occur within minutes of ingestion or a reaction can be delayed for up to two hours. Some reactions are “biphasic” in nature with an initial period of symptoms, a symptom free period of 2-3 hours followed by severe shock-like symptoms. Exposure may occur by eating the food or by food contact.

The most commonly prescribed medications for treatment of anaphylaxis are:

Epinephrine – Brand names include EpiPen, EpiPen Jr., or Twinject

Antihistamine – Benadryl

Treatment of anaphylaxis is centered on treating the rapidly progressing effects of the histamine release in the body with epinephrine and removing the allergen if possible.

PARENT'S RESPONSIBILITY

- Notify School Nurse of the child's allergies.
- Complete Family Food Allergy Health History Form prior to the first day of school.
- Work with Principal, Homeroom Teacher, and School Nurse to develop a plan that accommodates the child's needs throughout the school day as well as a Food Allergy Action Plan in the event of an emergency.
- Provide written medical documentation, instructions, and medications as directed by a physician, using the Food Allergy Action Plan as a guide.
- Provide properly labeled medications for School Office and classroom and replace medications after use or upon expiration.
- Educate the child in the self-management of their food allergy including:
 - safe and unsafe foods
 - strategies for avoiding exposure to unsafe foods
 - symptoms of allergic reactions
 - how and when to tell an adult they may be having an allergy related problem
 - how to read food labels (age appropriate)
- Provide emergency contact information.
- Encourage student to utilize allergy controlled zone during lunch period.

SCHOOL'S RESPONSIBILITY

- Review the health records submitted by parents and physicians.
- Include food-allergic students in all school activities.
- Assure that all staff who interact with the student on a regular basis understand food allergies, can recognize symptoms, and know what to do in an emergency.
- Complete the Food Allergy Action Plan with parents.

- Keep medications labeled and stored properly and ensure that all staff are aware of location of emergency medication.
- Designate school personnel who are properly trained to administer medications.
- Be prepared to handle a reaction and ensure that there is a staff member available who is properly trained to administer medications during the school day regardless of time or location.
- Discuss field trips with the family of the food-allergic child to decide appropriate strategies for managing the food allergy.

STUDENT'S RESPONSIBILITY

- Should not trade food or share utensils with others.
- Should utilize allergy controlled zone during lunch.
- Recognize the importance of hand washing before and after eating during the school day.
- Avoid putting anything in mouth such as writing utensils, fingers, or other foreign objects.
- Should not eat anything with unknown ingredients or known to contain any allergen.
- Should be proactive in the care and management of their food allergies and reactions based on their developmental level.
- Should notify an adult immediately if they eat something they believe may contain the food to which they are allergic.
- Should wash desk and chair with Lysol Wipes on Monday mornings.

TEACHER'S RESPONSIBILITY

- Know the signs and symptoms of allergic reaction as provided in the student's Food Allergy Action Plan.
- Participate in in-service training about students with life-threatening allergies, including demonstration on how to use Epinephrine.
- Review Food Allergy Action Plan with School Nurse.
- In collaboration with the Principal, and parents of the allergic child, set a classroom protocol regarding the management of food in the classroom. This protocol will be communicated by the teacher to the students and parents of the affected class.
- Reinforce appropriate classroom hygiene practices/hand washing before and after eating.

- Be prepared to put Food Allergy Action Plan into action in the event of an allergic reaction.