

**Meriden Public Schools**  
**Food Allergy Management Plan**

**GUIDELINES FOR MANAGING STUDENTS WITH FOOD ALLERGIES**

Food allergies can be life threatening. The risk of accidental exposure to foods can be reduced in the school setting if we work with students, parents and physicians to minimize risks and provide a safe educational environment for food-allergic students.

**Family's Responsibility**

- Notify the school of the student's allergies.
- Work with the school team to develop a plan that accommodates the student's needs throughout the school including in the classroom, in the cafeteria, in after-care programs, during school-sponsored activities, and on the school bus, as well as a Food Allergy Action Plan.
- Provide written medical documentation, instructions and medications as directed by a physician, using the Individualized Health Care Plan (IHCP) as a guide. Include a photo of the student on written form.
- Provide properly labeled medications and replace medications after use or upon expiration.
- Educate the student 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

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- How to read food labels (age appropriate).
- Review IHCP and procedure with the school staff, the student's physician, and the student (if age appropriate) after a reaction has occurred.
- Provide emergency contact information and update as changes occur.

**School's Responsibility**

- Follow applicable federal laws including ADA, IDEA, Section 504, and FERPA and Connecticut PA 05-104, An Act Concerning Food Allergies and the Prevention of Life Threatening Incidents in School.
- Review the health records submitted by parents and physicians.
- Include food-allergic students in school activities. Students should not be excluded from school activities solely based on their food allergy.
- Identify a core team of, but not limited to, school nurse, teacher, principal, school food service and nutrition manager/director, and counselor (if available to work with parents and the student (age appropriate) to establish an Individualized Health Care Plan (IHCP). Changes to the prevention plan to promote food allergy management should be made with core team participation, and shared with all staff that interacts with the student.
- Assure that all staff who interacts with the student on a regular basis understands food allergy, can recognize symptoms, knows what to do in an emergency, and work with other school staff to eliminate the use of food allergens in the allergic student's meals, educational tools, arts and crafts projects, or incentives.

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**GUIDELINES FOR MANAGING STUDENTS WITH FOOD ALLERGIES (cont'd.)**

- Train all food service personnel and transportation providers to understand food allergy, recognize symptoms, and access information contained in each student's IHCP to know what to do in an emergency.
- Coordinate with the school nurse to be sure medications are appropriately stored, and be sure that an emergency kit is available that contains a physician's standing order for epinephrine. In states where regulations permit, medications are kept in an easily accessible, secure location central to designated school personnel, not in locked cupboards or drawers. Students should be allowed to carry their own epinephrine, if age appropriate after approval from the students' physician/clinic, parent and school nurse, and allowed by state or local regulations.
- Designate school personnel who are properly trained to administer medications in accordance with the State Nursing and Good Samaritan Laws governing the administration of emergency 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.
- Review policies/prevention plan with the core team members, parents/guardians, student (age appropriate) and physician after a reaction has occurred.
- Enforce a "no eating" policy on school buses with exceptions made only to accommodate special needs under federal or similar laws, or school district policy.
- Discuss appropriate management of food allergy and logistics/limitations of management during transport with family.

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**GUIDELINES FOR MANAGING STUDENTS WITH FOOD ALLERGIES (cont'd.)**

- Discuss field trips with the family of the food-allergic student to decide appropriate strategies for managing the food allergy.
- Follow federal/state/district laws and regulations regarding sharing medical information about the student.
- Take threats or harassment against an allergic student seriously.

**Student's Responsibility**

- Should not trade food with others.
- 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.

Guidelines for Managing Life-Threatening Food Allergies in Connecticut  
Schools

Emergency Response Protocol

**Severe Food Allergy to Peanuts**

Student Name: \_\_\_\_\_

Teacher(s): \_\_\_\_\_

Parent Contact: \_\_\_\_\_

Mother's Full Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Mother's Cell: \_\_\_\_\_ Father's Cell: \_\_\_\_\_

Doctor Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Allergy Specialist: \_\_\_\_\_ Phone: \_\_\_\_\_

Key safety rules of the classroom & outside play area:

The regular and specials classrooms and play-areas are peanut- and tree nut-free environments.

1.) \_\_\_\_\_'s travel EpiPen® medicine kit and a walkie-talkie will remain with \_\_\_\_\_ at all times during the day and be managed by a trained adult.

2.) \_\_\_\_\_ eats only foods provided and labeled by parent/guardian.  
Adult will assist \_\_\_\_\_ daily in washing his/her hands thoroughly with soap and water for 15 seconds before eating. Adult in charge will approve daily snacks and other foods consumed by students.

Students and adults should wipe their hands with wipes upon entering the classroom and practice good hand washing techniques after eating.

If \_\_\_\_\_ asks to see the nurse, for any reason, allow him/her to do so immediately with an adult.

Asthmatic and at increased risk for severe reaction: \_\_\_Yes \_\_\_No

**SIGNS OF AN ALLERGIC REACTION INCLUDE:**

Systems	Symptoms	EpiPen® Directions:
Mouth*	itching and swelling of the lips, tongue, or mouth.	Pull off gray safety cap. Place black top on thigh, at right angle to leg (Always apply to thigh.) Using a quick motion, press hard into thigh until auto-injector mechanism functions and hold in place for 10 seconds. The EpiPen Jr unit should then be removed and discarded. Massage the injection area for 10 seconds.
Skin*	hives, itchy rash, and/or swelling about the face or extremities.	
Gut*	nausea, abdominal cramps, vomiting and/or diarrhea.	
Throat*	itching and/or sense of tightness in the throat, hoarseness, hacking cough.	
Lung*	shortness of breath, repetitive coughing, and/or wheezing.	
Heart*	“thready” pulse, “passing-out.”	

**MEDICINE KIT LOCATIONS:**

Kit #1: Classroom Med Kit located in classroom,

Kit #2: Travel Med Kit to be with adult with (Student’s name) at all times,

Kit #3: Nurses Med Kit located in nurses office with Albuterol and nebulizer.

Kit #4 located in front pouch of Student’s backpack. The medicine in the EpiPen Jr. cannot hurt \_\_\_\_\_ under any circumstances; it will save his/her life.

**WHAT TO DO:** If you suspect or know \_\_\_\_\_ has come into SKIN CONTACT with peanuts but not ingested them:

- 1.) contact the nurse. If nurse cannot respond immediately;
- 2.) wash point(s) of contact where the welt is located with warm soapy water, rinse and dry;
- 3.) Apply small amount of topical Benadryl cream;
- 4.) If he/she is uncomfortable, administer 2 teaspoons of Student’s Benadryl;
- 5.) Symptoms should stop progressing within five minutes.

If other welts are appearing quickly or you notice any other \*symptoms: **ALL** of the above symptoms can progress to a life-threatening situation. If you suspect or know peanuts have entered his/her mouth or he/she has ingested them, stay calm, and call the nurse. If the nurse cannot respond immediately, administer the EpiPen Jr. in thigh. Once needle is in, count to 10; then call 911 and transport to hospital!

## Food Allergy Action Plan

Student's Name: \_\_\_\_\_ D.O.B. \_\_\_\_\_ Teacher: \_\_\_\_\_

ALLERGY TO: \_\_\_\_\_

Asthmatic: \_\_\_\_\_ Yes\* \_\_\_\_\_ No \_\_\_\_\_ \*Higher risk for severe reaction

### STEP 1: TREATMENT

Symptoms	Give Circled Medication**:  **(To be determined by physician authorizing treatment)
If a food allergen has been ingested, but <i>no symptoms</i> :	Epinephrine Antihistamine
Mouth Itching, tingling, or swelling of lips, tongue, mouth	Epinephrine Antihistamine
Skin Hives, itchy rash, swelling of the face or extremities	Epinephrine Antihistamine
Gut Nausea, abdominal cramps, vomiting, diarrhea	Epinephrine Antihistamine
Throat * Tightening of throat, hoarseness, hacking cough	Epinephrine Antihistamine
Lung * Shortness of breath, repetitive coughing, wheezing	Epinephrine Antihistamine
Heart * Thready pulse, low blood pressure, fainting, pale, blueness	Epinephrine Antihistamine
Other * _____	Epinephrine Antihistamine
If reaction is progressing (several of the above areas affected), give _____	Epinephrine Antihistamine

**\*Potentially life threatening. The severity of symptoms can quickly change.**



DOSAGE

**Epinephrine: inject intramuscularly (circle one)**

EpiPen, EpiPen Jr, Twinject 0.3 mg, Twinject 0.15mg

**Antihistamine: Give:**

\_\_\_\_\_

(medication/dose/route)

**Other: Give:**

\_\_\_\_\_

(medication/dose/route)

**IMPORTANT: Asthma inhalers and/or antihistamines cannot be depended on to replace epinephrine in anaphylaxis.**

**STEP 2: EMERGENCY CALLS**

Call 911 (or Rescue Squad: \_\_\_\_\_). State that an allergic reaction has been treated, and additional epinephrine may be needed.

Dr. \_\_\_\_\_ at \_\_\_\_\_

Emergency contacts:

Name/Relationship/Phone Numbers(s)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**EVEN IF PARENT/GUARDIAN CANNOT BE REACHED, DO NOT HESITATE TO MEDICATE OR TAKE STUDENT TO MEDICAL FACILITY!**

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

Doctor's Signature \_\_\_\_\_

Date \_\_\_\_\_

(Required)

If desired, place Student's picture here

**TRAINED STAFF MEMBERS**

1. \_\_\_\_\_ Room \_\_\_\_\_
2. \_\_\_\_\_ Room \_\_\_\_\_
3. \_\_\_\_\_ Room \_\_\_\_\_
4. \_\_\_\_\_ Room \_\_\_\_\_
5. \_\_\_\_\_ Room \_\_\_\_\_
6. \_\_\_\_\_ Room \_\_\_\_\_

**Directions:**

<p><b><u>EpiPen and EpiPen Jr.</u></b></p> <p>Pull off gray activation cap.</p> <p>Hold black tip near outer thigh (always apply to thigh).</p> <p>Swing and jab firmly into outer thigh until Auto-Injector mechanism functions. Hold in place and count to 10. Remove the EpiPen unit and massage the injection area for 10 seconds.</p>	<p><b><u>Twinject 0.3 mg &amp; Twinject 0.15 mg</u></b></p> <p>Pull off green end cap, then red end cap.</p> <p>Put gray cap against outer thigh, press down firmly until needle penetrates. Hold for 10 seconds, then remove.</p> <p><b><u>SECOND DOSE ADMINISTRATION</u></b></p>
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***If symptoms don't improve after 10 minutes, administer second dose:***

Unscrew gray cap and pull syringe from barrel by holding blue collar at needle base.

Slide yellow or orange collar off plunger.

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

Once EpiPen or Twinject is used, call the Rescue Squad. Take the used unit with you to the Emergency Room. Plan to stay for observation at the Emergency Room for at least 4 hours.

***\*\*Medication checklist adapted from the authorization of Emergency Treatment form developed by the Mount Sinai School of Medicine. Used with permission.***