

ANAPHYLAXIS EMERGENCY PLANS

1. Every emergency plan will include procedures to:
 - 1.1 Communicate the emergency rapidly to a staff person who is trained in the use of the epinephrine injector;
 - 1.2 Administer the epinephrine injector (note: although most anaphylactic children learn to administer their own medication by about age 8, individuals of any age may require help during a reaction because of the rapid progression of symptoms, or because of the stress of the situation; therefore, adult supervision is required);
 - 1.3 Telephone 911 or an ambulance (the emergency operator should be informed that a child is having an anaphylactic reaction; in some areas, hospitals will send a physician on the ambulance to begin emergency treatment at once);
 - 1.4 Telephone the parents/guardians of the child;
 - 1.5 Re-administer epinephrine every 10 to 15 minutes while waiting for the ambulance and en route to the hospital if breathing does not improve or if symptoms reoccur; and
 - 1.6 Assign a staff person to take extra epinephrine injectors, accompany (or follow, if necessary) the child to the hospital, and stay with them until a parent or guardian arrives.
2. Location Of Epinephrine
 - 2.1 Epinephrine injectors are to be kept in a covered and secure area, but unlocked for quick access. Although epinephrine is not a dangerous drug, the sharp needle of the self-injector can cause injury, especially if injected into the fingertip.
 - 2.2 As soon as they are old enough, students should carry their own epinephrine injectors. Many young children carry an injection kit in a fanny pack around their waist at all times.
 - 2.3 An up-to-date supply of epinephrine injectors, provided by the parents, will be available in an easily accessible, unlocked area of the child's classroom and/or in a central area of the school (office or staffroom).
 - 2.4 All staff should know the location of the epinephrine injectors. Classmates are to be aware of the location of the epinephrine injector in the classroom.

3. Training Older Students To Assist

- 3.1 Older students may be trained to administer the epinephrine injector, and can play a role in the emergency response, particularly in a secondary school setting. Information about anaphylaxis and epinephrine injector training may be included in the health curriculum.

4. Role-Playing

- 4.1 The school may occasionally simulate an anaphylactic emergency - similar to a fire drill - to ensure that all elements of the emergency plan are in place.

5. Review Process

- 5.1 School emergency procedures for each anaphylactic student should be reviewed with staff and parents each term or as directed by a physician. In the event of an emergency response, an immediate evaluation of the procedure should be undertaken.

Reference: Sections 7, 17, 20, 22, 65, 84, 85, 95 School Act
School Regulation 265/89
Anaphylaxis Protection Order M232/07
Anaphylaxis: A Handbook for School Boards, Canadian School Boards Association
British Columbia Anaphylactic and Child Safety Framework

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