

## RECOGNITION AND TREATMENT OF ANAPHYLAXIS IN THE SCHOOL SETTING

### A. General

Anaphylaxis is a severe systemic allergic reaction from exposure to allergens that is rapid in onset and can cause death. Common allergens include animal dander, fish, latex, dairy, shellfish, tree nuts, eggs, insect venom, medications, peanuts, soy, and wheat. Common symptoms of anaphylaxis include sudden difficulty breathing, wheezing, hives, generalized flushing, itching or redness of the skin; swelling of the throat, lips, tongue; tightness/change of voice; difficulty swallowing; tingling sensation, itching or metallic taste in mouth; feeling of apprehension, agitation. Although anaphylaxis typically results in multiple symptoms, reactions may vary substantially from person to person. In some individuals, a single symptom may indicate anaphylaxis. Non-food items such as classroom materials and arts and craft supplies may contain trace amounts of food product capable of causing an allergic reaction. A severe allergic reaction usually occurs quickly; death has been reported to occur within minutes. An anaphylactic reaction can generally occur up to one to two hours after exposure to the allergen. In about a third of anaphylactic reactions, the initial symptoms are followed by a delayed wave of symptoms two to four hours later.

### B. Stock Epinephrine

It is the policy of Bath County Public Schools to provide at least two (2) doses of auto-injectable epinephrine in each school, to be administered by a school nurse or employee of the school board who is authorized and trained in the administration of epinephrine to any student believed to be having an anaphylactic reaction on school premises, during the academic day.

The Code of Virginia provides civil protection for employees of a school board who are appropriately trained to administer epinephrine. Epinephrine should be administered promptly at the first sign of anaphylaxis. The Virginia School Health Guidelines developed by the Department of Health, in conjunction with the Department of Education and the Department of Health Professionals, state that it is safer to administer epinephrine than to delay treatment for anaphylaxis.

Epinephrine will be stored in a safe, unlocked and accessible location during the academic day and this requirement supersedes any other School Board policy to the contrary. The school division should maintain a sufficient number of extra doses of epinephrine for replacement of used or expired school stock on the day it is used or discarded. School principals or school nurses will be responsible for the distribution, review of storage and monitoring of expiration dates for the epinephrine stored at schools.

### C. Policy Limitations

Parents of students with known life threatening allergies and/or anaphylaxis should provide the school with written instructions from the student's health care provider for handling anaphylaxis and all necessary medications for implementing the student specific order on an annual basis. If student-specific orders are on file they should be followed for students with known life threatening allergies and/or anaphylaxis.

This anaphylaxis policy is not intended to replace student specific orders or parent provided individual medications. This policy does not extend to activities off school grounds (including transportation to and from school, field trips, etc.) or outside of the academic day (sporting events, extra-curricular activities, etc.).

### D. Standing Orders

Standing orders are written to cover multiple people as opposed to individual specific orders, which are written for one person. Bath County Public Schools shall designate an authorized medical provider (MD, DO, PA, or NP with prescriptive authority) to prescribe non-student specific epinephrine for the school division, to be administered to any student believed to be having an anaphylactic reaction on school grounds, during the academic day. Standing orders must be renewed annually and with any change in prescriber.

### E. Training

Each school principal shall be responsible for identifying at least two employees, in addition to the school nurse (RN), to be trained in the administration of epinephrine by auto-injector. Only trained personnel should administer epinephrine to a student believed to be having an anaphylactic reaction. Training shall be conducted in accordance with the most current edition of the Virginia Department of Education's Manual for Training Public School Employees in the Administration of Medication. Training shall be conducted annually or more often as needed.

### F. Post-Event Action

Once epinephrine is administered, local Emergency Medical Services (911) shall be activated and the student transported to the emergency room for follow up care. Parents/guardians will be notified of the administration and contact with emergency services. The student will not be allowed to remain at school or return to school on the day epinephrine is administered. The school nurse or health clinic assistant will complete a Report of Anaphylactic Reaction report and provide a copy of the report to the Office of the Superintendent with a request for replacement epinephrine.

Adopted: November 6, 2012

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Legal References: Code of Virginia §8.01-225, §22.1-274.2 and §54.1-3408