Anaphylactic Booklet
Holy Name Primary School

2009
Want to know about Peanut Allergy?
Then please read on!
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What is anaphylaxis?
Anaphylaxis is a severe and sudden allergic reaction. It occurs when a person is exposed to an allergen to which they are sensitive. The most common allergens or trigger substances that may cause anaphylaxis in school-aged children are peanuts, tree nuts, fish, shellfish, egg, cow’s milk, sesame, soy, insect stings, latex and certain medications.

Symptoms and signs of anaphylaxis
The symptoms and signs of anaphylaxis, usually but not always, occur within the first 20 minutes after exposure but in some cases can be delayed up to 2 hours or more. Rapid onset and development of potentially life-threatening clinical effects are characteristic markers of anaphylaxis.

Symptoms and signs of anaphylaxis (a severe allergic reaction) may include one or more of the following:

- Difficulty and/or noisy breathing
- Swelling of the tongue
- Swelling or tightness in the throat
- Difficulty talking or hoarse voice
- Wheeze or persistent cough
- Dizzy/light headed
- Loss of consciousness and/or collapse
- Pale and floppy (young child).

Examples of strategies to minimise students’ exposure to potential allergens include:

For the school
- ensuring consideration is given to changes from usual school routine such as the use of relief teachers
- ensuring consideration is given to students participating in excursions, camps, and sports carnivals including the provision of full medical information and a student’s Action Plan for Anaphylaxis to outside school venues
- ensuring consideration is given to the distance from the school, camp or location of a school activity to an ambulance service or medical treatment
• on school camps where there are students with severe nut allergy, it should be requested that foods containing nuts are not taken to or supplied by camp organisations

• including information on severe allergic reactions in curriculum

• adopting a no food and drink sharing policy at school

• promoting hand washing before and after eating

• informing other class members’ parents/caregivers of trigger substances and request that these foods are avoided

• ensuring that bullying by provoking allergic students with potential allergens is recognised as a risk factor and addressed by anti-bullying policies

• encouraging affected students to wear a medic alert.

**For the classroom**

• avoiding the use of high risk allergens such as peanuts and tree nuts in curricular activities

• reviewing curriculum materials to ensure that they do not advocate the use of high risk allergens such as peanuts and tree nuts

• being aware that craft items can be risk items (for example, egg cartons, milk containers, peanut butter jars)

• avoiding the use of party balloons where latex is a known allergen. Severe Allergic Reactions 6
For parents

- Parents providing safe food to enable the child with allergies to participate in activities such as birthday celebrations

- Parents providing drink containers and lunch boxes, which are clearly labelled with the name of the child for whom they are intended.

The Australasian Society of Clinical Immunology and Allergy (ASCIA) has information on the prevention of food anaphylactic reactions in schools, preschools and childcare centres available at www.allergy.org.au/pospapers/anaphylaxis.htm
The Role of the Principal

It is the role of the principal at Holy Name Primary School to:

• inform the school community about anaphylaxis and the guidelines for managing and treating students with anaphylactic and potential anaphylactic reactions

• obtain from the parents/caregivers of an anaphylactic or potentially anaphylactic student an Action Plan for Anaphylaxis, which has been signed by a medical practitioner

• ensure that equipment and consumables, including medication (for example, EpiPen), used to treat severe allergic reactions is stored properly and securely but is readily accessible at all times (for example, not locked in a cupboard or room), including after hours if the child attends before or after-school care or participates in extra-curricular activities on the school grounds outside normal school hours

• ensure that all staff are aware of any students who, based on written medical advice, are authorised to carry emergency medication on their person and self-administer this medication

• ensure that, where a student has been diagnosed by a medical practitioner as being anaphylactic or potentially anaphylactic, all staff have been provided with a copy of the Interim Anaphylaxis Guidelines for Queensland Schools and have viewed the PowerPoint presentation Management and Treatment of Students with Anaphylaxis available at [www.education.qld.gov.au/schools/healthy](http://www.education.qld.gov.au/schools/healthy) and the School website [www.hntwb.catholic](http://www.hntwb.catholic).

• advise all staff of the relevant details of the individual student’s severe allergy

• negotiate conditions around self-administration of medication by a student

• ensure that, where indicated by the medical practitioner on the Action Plan for Anaphylaxis that the treatment for a student’s severe allergic reaction is the
administration of an EpiPen, a range of staff has undergone training in the use of an EpiPen

- ensure that students at risk of anaphylaxis are given every opportunity to participate in a full range of school activities
The Role of the Parent/Caregiver

It is the role of the parent/caregiver to:

• upon enrolment, or if the student is enrolled, as soon as possible after diagnosis, inform the principal of the school in writing that their child is at risk of an anaphylactic reaction

• notify the school in writing of any requests and/or guidelines from medical practitioners concerning the student’s anaphylaxis

• provide the school with an Action Plan for Anaphylaxis signed by a medical practitioner, for all students who have been diagnosed as anaphylactic or potentially anaphylactic

• provide written notification for the school to administer or assist a student with the administration of a prescribed medication (for example, EpiPen) in the management of an anaphylactic reaction

• provide the equipment and consumables, including medication (for example, EpiPen), for carrying out emergency treatment as specified in the student’s Action Plan for Anaphylaxis

• notify the school if a student is to carry emergency medication (for example, EpiPen) on their person and self-administer this medication

• negotiate with the principal the conditions around which their student self-administers medication

• ensure that the equipment and consumables, including medication (for example, EpiPen) provided, is not out of date and is labelled clearly with the student’s name and dosage information

• replace the medication (for example, EpiPen) when it expires or after it has been used.
Plan for Anaphylaxis – is in every classroom.