



# RIVER VALLEY SCHOOL DISTRICT

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## Managing Life-Threatening Food Allergies

### Policy Statement

River Valley School District will take all appropriate steps to minimize risks and provide a safe educational environment for students with life-threatening allergies.

### Background

A life threatening food allergy occurs when the body's immune system has a hypersensitive reaction to a food allergen.

### Symptoms

Allergic reactions to foods can vary from localized, mild to systemic, life-threatening reactions. A history of asthma is a risk factor for a more severe reaction. Symptoms may include all listed below or only one. Systemic symptoms that pose a risk for anaphylaxis usually occur within minutes to 2 hours after exposure and may appear in any order. The student may also experience a rebound effect where the symptoms may appear to be resolved and reoccur hours later without any additional exposures.

System	Symptoms
Heart	Thready pulse, low blood pressure, faint, pale
Abdomen	Nausea, vomiting, cramping, diarrhea
Lungs	Shortness of breath, coughing, wheezing, chest tightness
Mouth	Itching, tingling, swelling of lips, tongue, mouth
Neurologic	Anxiety, sense of doom
Eyes/Nose	Itching, sneezing, congestion, runny nose, red eyes, tearing
Skin	Hives, itchy rash, swelling of the face or extremities
Throat	Tightening of throat, hoarseness, hacking cough, difficulty swallowing, difficulty speaking, change of voice

### Management

1. Follow School Emergency Plan for students with known history of food allergens. Variations in individual treatments will be guided by specific health care provider orders.
2. For students with undiagnosed but suspected severe allergic reaction, call a building code blue team in the building.
3. For a severe reaction, administer Epinephrine as indicated, then call 911. The student should always be transported to an emergency room when Epinephrine is given.
4. The Code Blue Team including the School Nurse should be documenting the following information and document Code Blue form.
  - a. Food ingested
  - b. Symptoms (onset and duration)
  - c. Vital signs
  - d. Time of the administration Epinephrine
  - e. Past medical history and occurrences
5. Inform parents/guardians and health care provider

6. The school nurse shall conduct post event debriefing with the Code Blue Team following the response to provide feedback and improvement for future emergency responses.

### **Protocol**

The school nurse will obtain or coordinate the following items:

1. Student History
  - a. Review students medical history and documentation from the provider
  - b. Review medical orders
  - c. Work with parents to create Emergency Action Plan
2. Documentation

Orders will be kept in Skyward, medical file, and Emergency Code Blue bag.
3. Forms and letters
  - a. School Emergency Plan. The school nurse makes sure that a student with a medically documented food allergy or who is prescribed epinephrine has an Emergency Action Plan. The recommended form is the Food Allergy and Anaphylaxis Care Plan which was developed by FARE (Food Allergy Resource and Education). A copy of the Food Allergy and Anaphylaxis plan shall be filed in the health office provided to appropriate school staff, kept in the code blue binder, and brought on all field trips.
  - b. Food Service- The nurse shall provide food service with a copy of a student's documentation of their life threatening food allergy.
  - c. Classroom Parent/Guardian letter- The school nurse notifies teachers/parents and sends home a Food Allergy Letter informing them that there is a student with a serious food allergy in their classroom.
4. Medications

Every student with a life threatening food allergy should have emergency medication in the Code Blue Bag. Some students may carry their emergency medication with them if ordered by their physician. Epinephrine should be kept unlocked in a easily accessible location. Medication expiration dates should be checked every three months.
5. Student Self-Care

The nurse should assess the student's knowledge of his or her life threatening food allergy and self-care capability. If the student, parent/guardian, and health care provider agree to allow the student to carry and use the epinephrine auto-injector while at school, the Parent and Health Care Provider Medication Administration form and/or the Food Allergy and Anaphylaxis Emergency Care Plan is completed. The nurse may consult with the health care provider if self-care capability is questioned or noncompliance is an issue.
6. Staff training
  - a. School Staff: All school staff should receive the basic knowledge about life threatening food allergies. Information will be handed out and a DPI approved video will be provided. A DPI approved video and printed information will be discussed in the beginning of each school year. This can include the following information:
    - i. The definition of food allergy and anaphylaxis
    - ii. A list of major allergens
    - iii. Signs and symptoms of food allergy and anaphylaxis
    - iv. Treatment of life threatening allergies
    - v. Epi-pen
    - vi. Best practices for preventing exposure to food allergies.
  - b. Staff with frequent contact with a student with food allergies. The nurse informs the teachers about the following information:
    - i. Students in their classroom with Life Threatening Food Allergy and their Emergency Care Plan with examples of a nut safe classroom sign
    - ii. Snack and lunch room procedures

- iii. Classroom Parent/Guardian Letter
  - c. Medication Administration Training. The school nurse will assist with the following trainings.
    - i. DPI approved medication training
    - ii. Yearly skills training
  - d. Student education and bullying prevention. The nurse and/or teacher will present materials in the classroom about Life Threatening Food Allergies. Educating classmates helps avoid isolating, stigmatizing, or harassment of students with Life Threatening Food Allergies. Staff enforces rules about bullying/threats.
  - e. Field trips: If going on a field trip with a student who has a known history of anaphylaxis, at least one staff member trained in medication administration should be available to the student who has a history of anaphylaxis, along with the medication. Have a cell phone available in case of an emergency. No food should be eaten on the buses unless it is medically necessary.
7. Parent/Guardian Information
- a. 504 Plan
    - i. School staff is required to inform families that their child may qualify for a 504 plan if they have a food allergy. Not all children will need a 504 accommodations but families should be given the choice whether or not to pursue a 504 plan.
  - b. Bus Transportation
    - i. Bus questions should be directed to the bus company provided services for River Valley School District. The nurse will inform the bus company of health concerns with permission from the parents. A yearly review of life threatening allergies and the administration of epinephrine auto-injectors will be taught by the school nurse.
  - c. Parent Allergy Information Sheets will be sent home to parent/guardian.
8. Cleaning Protocols
- a. Soap and water or disposable wipes are most effective methods of removing food proteins from surfaces or hands. Unless otherwise requested and documented from a provider, special cleanings are not recommended.
  - b. To avoid food protein contamination, allergy-free lunch tables should be cleaned with separate supplies from regular lunch tables.

## **Resources and References**

National Association of School Nurses: <http://www.nasn.org/ToolsResources/FoodAllergyandAnaphylaxis>

The School Food Allergy Program: [www.foodallergy.org](http://www.foodallergy.org)

Safe at School and Ready to Learn: <http://nsba.org/foodallergyguide.pdf>

2011 Wisconsin Act 85

Food Allergy and Anaphylaxis Care Plan Developed by FARE (Food Allergy Resource and Education)

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