Allergy/Anaphylaxis Management Algorithm I

**Planning Phase**

- **Student is enrolled at school.**
- **Parent/legal guardian completes Health History Form.**

  - **Significant Allergy is confirmed by healthcare provider.**
  - **Medical/medication orders are provided to school nurse.**
  - **School administration is notified of allergy and anaphylaxis risk.**

  - **Parent/legal guardian indicates that student has a significant food and/or other allergy.**

    - **Yes**
    - **No**

  - **Refer parent/legal guardian to healthcare provider for a health and/or emergency plan for safe care at school.**
  - **Involve school administration and/or other student support staff as needed.**

**School nurse:**
- **Follows school district policies/protocols and initiates individualized health plan (IHP)/emergency action plan (EAP).**
- **Contacts parent/legal guardian to:**
  - Review history of allergic reaction symptoms;
  - Identify other significant health findings, such as asthma;
  - Obtain emergency medications, if not already provided; and,
  - Secure signature on the IHP/EAP.
- **Places health-alert on student’s permanent health record and in PowerSchool.**
- **Obtains schedule and identifies student’s teachers, coach, bus driver, and leaders of before/after school activities and events, as applicable.**
- **Communicates and distributes IHP/EAP to identified school staff, administrators, designated first responders, and cafeteria manager, if food allergy.**
- **Provides anaphylaxis emergency response training to identified individuals who have oversight responsibility of student.**
- **Implements allergy awareness and safety measures; e.g., parent letters and posters in classrooms/designated areas.**
- **Conducts periodic audits to monitor student safety measures and staff compliance with EAP.**
- **Collaborates with principal, student’s teachers, and all stakeholders to assure safety in the school environment.**
- **Maintains open communication with student’s parent/legal guardian and healthcare provider regarding medical status and/or needs.**
- **Updates emergency contact information of parent/legal guardians and/or the student’s IHP/EAP, with designated changes.**

**The student is exposed to an allergen.**

- **No, a reaction does not occur.**
  - **Maintain current plan.**
  - **Follow-up with designated staff to reinforce training and the student’s IHP/EAP.**

- **Yes, an allergic reaction occurs.**
  - **Proceed to Algorithm II: Provision of Care.**