

ALLERGIC REACTION

Children may experience a delayed allergic reaction up to 2 hours following food ingestion, bee sting, nuts, etc.

Does the student have any symptoms of a SEVERE allergic reaction which may include:

- Blueness around mouth, eyes?
- Confusion?
- Difficulty breathing?
- Dizziness?
- Drooling or difficulty swallowing?
- Feelings of impending doom?
- Flushed face?
- Hives all over body?
- Loss of consciousness?
- Paleness?
- Seizures?
- Swelling to face, lips, tongue, mouth?
- Vomiting?
- Weakness?

YES

- Check student's airway.
- Look, listen and feel for breathing.
- If student stops breathing, start CPR.

Does the student have an emergency care plan available or does the school have stock epinephrine available?

NO

Continue monitoring, initiate CPR if needed.

CALL EMS/911
Contact responsible school authority & parent/guardian.

Stock epinephrine

Refer to the school's non-student specific stock epinephrine protocol. Administer stock epinephrine as indicated.

Student emergency care plan

Refer to the student's plan. Administer healthcare provider and parent approved medication as indicated.

Document care provided and medication administered, if applicable

NO

Symptoms of a MILD allergic reaction include:

- Red, watery eyes.
- Itchy, sneezing, runny nose.
- Hives or rash on one area.

Adult(s) supervising student during normal activities should be aware of the student's exposure and should watch for delayed symptoms of a severe allergic reaction (see above) for up to 2 hours.

Does the student have an allergy emergency care plan?

YES

Refer to the student's plan. Administer healthcare provider and parent approved medication as indicated.

NO

If student is uncomfortable and unable to participate in school activities, contact responsible school authority & parent/guardian.

If unable to reach parent/guardian, allow student to rest with adult supervision. Monitor for signs & symptoms of severe allergic reaction.

ASTHMA – WHEEZING – DIFFICULTY BREATHING

Students with a history of breathing difficulties including asthma/wheezing should be known to appropriate school staff. A School Asthma Care Plan should be developed. CO law allows students to possess and use an asthma inhaler in school. Staff in a position to administer quick relief inhaler should receive instruction.

A student with asthma/wheezing may have breathing difficulties which may include:

- Uncontrollable coughing.
- Wheezing – a high-pitched sound during breathing out.
- Rapid breathing
- Flaring (widening) of nostrils
- Feeling of tightness in the chest.
- Not able to speak in full sentences.
- Increased use of stomach and chest muscles during breathing.

• Does the student have a School Asthma Care plan?

YES

Refer to student's Asthma Care Plan.

Has a quick-relief inhaler already been used? If yes, when and how often?

YES

NO

Administer medication as directed.

Remain calm. Encourage the student to breathe slowly and deeply in through the nose and out through the mouth.

Are symptoms not improving or getting worse? Are the lips, tongues or nail beds turning blue?

CALL
EMS
9-1-1

Contact responsible school authority, school nurse & parent/legal guardian.

CALL EMS
9-1-1

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Follow district protocol for students with severe asthma symptoms.

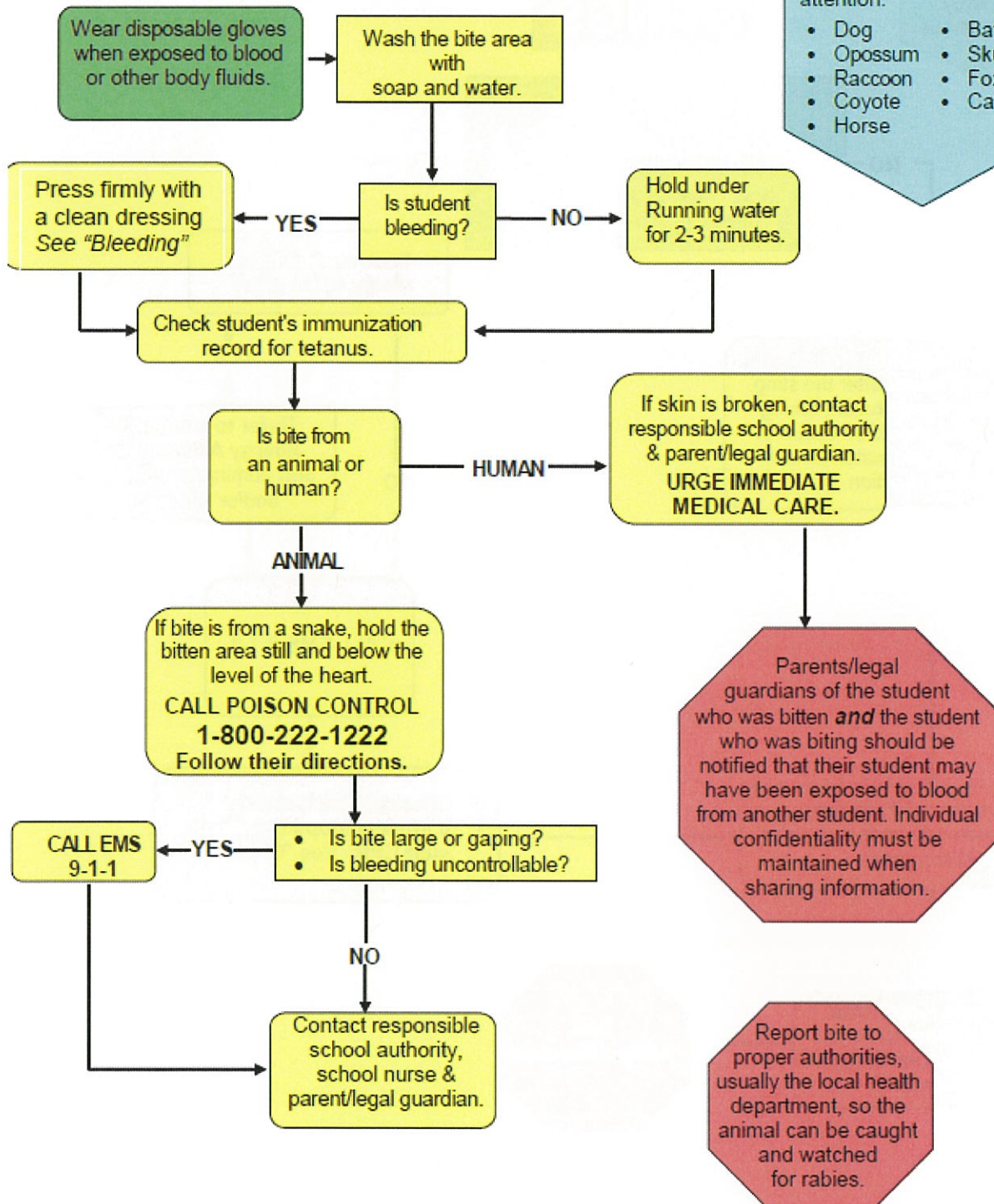
YES

NO

BITES (HUMAN & ANIMAL)

Bites from the following animals can carry rabies and may need medical attention:

- Dog
- Opossum
- Raccoon
- Coyote
- Horse
- Bat
- Skunk
- Fox
- Cat



DIABETES

A student with diabetes should be known to appropriate school staff. A Diabetes Action plan must be developed. Staff in a position to administer a Glucagon injection should receive training and delegation.

A student with diabetes may have the following symptoms of low blood sugar:

- Irritability and feeling upset
- Change in personality
- Sweating and feeling "shaky"
- Loss of consciousness
- Confusion or strange behavior

Refer to student's Diabetes Action plan.

