

## ANAPHYLAXIS POLICY

DM Approval:



Effective Date: July 1, 2015

### GENERAL INFORMATION

Anaphylaxis is a sudden and potentially fatal allergic reaction requiring immediate medical emergency measures. Symptoms of anaphylaxis can occur within minutes of exposure to an allergen. An anaphylactic reaction can involve any of the following symptoms, which may appear alone or in combination:

- **Skin System** – hives, swelling, itching, warmth, redness, rash.
- **Respiratory System** – coughing, wheezing, shortness of breath, chest pain/tightness, hoarse voice, nasal congestion or hay fever-like symptoms (runny, itchy nose and watery eyes, sneezing), trouble swallowing.
- **Gastrointestinal System** – nausea, pain/cramps, vomiting, diarrhea.
- **Cardiovascular System** – pale/blue colour, weak pulse, passing out, dizziness/lightheadedness, shock.
- **Other** - anxiety, melancholy, feeling of 'impending doom', headache, uterine cramps, metallic taste.

### PURPOSE

The purpose of this policy is to reduce preventable, serious reactions and deaths due to anaphylaxis and life-threatening allergies in schools by providing clarity to school staff, parents and students regarding their roles and responsibilities that comply with Anaphylaxis Canada safety standards.

### DEFINITIONS

'Allergen' means a substance capable of causing an allergic reaction, and may include food, insect stings, medication, pollen, mould, animal dander, house dust mites and natural latex.

'Anaphylaxis' means a sudden and potentially fatal allergic reaction requiring immediate medical emergency measures.

'Auto-injector' means a user-friendly pre-loaded syringe used to administer epinephrine (i.e. EpiPen, Twinject).

'Epinephrine' means a synthetic version of the hormone adrenalin that is used in the treatment of anaphylaxis and life-threatening asthma attacks.

'Parent' means the biological parents, the adoptive parents by custom or otherwise, the persons legally entitled to custody or the persons who usually have the care and control of the child.

'School Administrator' means the principal, vice-principal or other identified school staff as appropriate.

'School Community' means everyone in a community that has contact with a school, including students, families, Yukon Education staff, School Councils, First Nations and other partners in education.

## **POLICY STATEMENT**

Yukon Education recognizes that it has a duty of care to students who are at risk from severe or life-threatening allergic reactions while under school supervision. This responsibility is shared among the student, parent(s), school staff and health care providers (e.g. doctors, nurses, emergency medical personnel, etc.).

### **Standards and Procedures**

1. Epinephrine is the first line of treatment for anaphylaxis. An epinephrine auto-injector should be given at the first sign of a known or suspected anaphylactic reaction, including in previously undiagnosed individuals. In normally healthy individuals, epinephrine will not cause harm.
2. No person should be expected to be fully responsible for self-administration of an epinephrine auto-injector. A teacher or other school staff must assist a student presenting with symptoms of anaphylaxis, as described above.
3. 9-1-1 or local emergency medical services should be called following administration of epinephrine, and advised that someone is having a life-threatening allergic reaction. School staff must follow instructions received from emergency medical services.
4. All individuals receiving emergency epinephrine must be transported to a hospital or medical facility immediately, by ambulance where possible, for evaluation and observation.

5. Additional epinephrine must be available during transport. A second dose may be administered within 5 to 15 minutes after the first dose was given if symptoms have not improved.

## **ROLES AND RESPONSIBILITIES**

It is a parent's responsibility to:

- educate the allergic child about avoidance strategies;
- inform the school administrator about the child's allergies, and complete an annual Administration of Medication Plan/Emergency Procedure for the child;
- where a family physician has provided recommendations for risk reduction strategies and treatment of an anaphylactic reaction that differ from those outlined in this policy, provide the school with written instructions signed by the physician and discuss these with the child's school staff and caregivers;
- provide the school with an epinephrine auto-injector which is not expired (it is recommended that parents keep a log of expiry dates and promptly replace outdated auto-injectors); and
- promptly update school staff on any changes (e.g. diagnosis of an additional allergy, or outgrowing of an allergy).

It is the responsibility of the school administrator to:

- ensure that there is an anaphylaxis prevention and management plan for the school, which may include restrictions on certain food products in the school due to food allergies as well as other precautions as deemed necessary;
- communicate emergency procedures for responding to anaphylaxis to staff, and review and update these procedures on a regular basis;
- consult with a child's parents before posting the child's Administration of Medication Plan/Emergency Procedure (plans and photos of anaphylaxis children should be kept in areas accessible to staff, while respecting the privacy of the child);
- ensure that the school has readily available first-aid kits that contain spare epinephrine auto-injectors, and arrange to periodically check and replace expired doses (as needed, school administrators may purchase generic non-prescription epinephrine auto-injectors using their school budget);
- arrange for annual standardized anaphylaxis training as required, including ways to reduce risk of exposure, recognition of signs and symptoms of anaphylaxis, and when and how to use an epinephrine auto-injector;
- ensure that auto-injectors are continuously and properly stored at the school, and have not expired; and
- ensure that an incident report is completed any time an epinephrine auto-injector is administered to a student at the school.

## **APPLICATION**

This policy applies to all staff of Yukon Education and all other members of the School Community.

## **EXCEPTIONAL CIRCUMSTANCES**

In situations where the individual circumstances of a case are such that the provisions of this policy cannot be applied or to do so would result in an unfair or an unintended result, the decision may be based on the individual merits and justice of the situation. Such a decision will be considered for that specific case only and will not be precedent setting.

## **EFFECTIVE DATE**

This policy is effective July 1, 2015.

## **LEGISLATIVE AND POLICY REFERENCES**

Education Act, ss. 168 (i) and (m)

Yukon Education 'Administration of Medication to Students Policy'

Yukon Education 'Yukon School Procedures Handbook'

Anaphylaxis in Schools and Other Settings (Guidelines from Anaphylaxis Canada and the Canadian Society of Allergy and Clinical Immunology)

## **HISTORY**

Anaphylaxis Policy, effective September 5, 2012; amended effective July 1, 2015.