

PEDIATRIC FIRST AID – SEVERE ALLERGIC REACTION



Student Name _____ Class Date _____

You are a trained pediatric first aid provider responding to a call for help received over your workplace mobile device for a child with trouble breathing. As you reach the scene, you see an 8-year-old child sitting at a table. You have appropriate PPE and a first aid kit. Demonstrate what actions you would take next.

Procedure	Provider Action (Performance Criteria)	Instructor Prompt	Check Off
Performs Assessment	<ul style="list-style-type: none"> ▸ Assesses scene safety. ▸ Takes (or verbalizes taking) Standard Precautions. ▸ Assesses responsiveness. ▸ Activates EMS and/or EAP. ▸ After activating, and unless they are readily available, sends someone to get the first aid kit and an AED. 	<p><i>“The scene is safe.”</i></p> <p><i>“Child is responsive.”</i></p> <p><i>“EMS/EAP activated.”</i></p> <p><i>“Other first aid providers are on the way, bringing an AED, an additional first aid kit and an epinephrine autoinjector.”</i></p>	
Assesses Breathing	<ul style="list-style-type: none"> ▸ Assesses breathing for no more than 10 seconds. 	<p><i>“Child is responsive and breathing.”</i></p>	
Obtains Consent	<ul style="list-style-type: none"> ▸ Obtains consent from a parent or legal guardian, if readily available (unless previously established). ▸ Introduces self and lets the child know you are there to help. 	<p><i>“A parent or legal guardian is not readily available to provide consent.”</i></p>	
Assesses for Life-Threatening Conditions	<ul style="list-style-type: none"> ▸ Quickly scans the child for life-threatening conditions. 	<p><i>“The child is in obvious distress – trembling, wheezing, and coughing. You see swelling of their lips, eyelids, and face. With difficulty the child says, “Ate...pretzel bite...had peanut...butter...inside.”</i></p>	
Immediately Provides Appropriate First Aid	<ul style="list-style-type: none"> ▸ Allows the child to find the most comfortable position in which to breathe. 	<p><i>“Child wants to sit up.”</i></p>	

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Procedure	Provider Action (Performance Criteria)	Instructor Prompt	Check Off
Performs a Secondary Assessment	<ul style="list-style-type: none"> ▸ Looks for medical identification jewelry. 	<p><i>“Child is wearing a Medical Alert Bracelet on wrist that states, ‘Nut Allergy – Use EpiPen®.’”</i></p> <p><i>[Instructor Note: Hand student an epinephrine autoinjector trainer. Say, “Here’s an EpiPen®. Child has a prescription but left the device at home.”</i></p>	
Correctly Uses Epinephrine Autoinjector Trainer	<ul style="list-style-type: none"> ▸ Grasps epinephrine autoinjector trainer in fist with the orange tip pointing downward. ▸ Removes blue safety release. ▸ Positions trainer near middle of person’s outer thigh. ▸ Swings and firmly pushes orange tip at a 90-degree angle against thigh until it clicks. ▸ Holds device firmly on thigh for 3 seconds. ▸ Removes the trainer from the thigh and massages the injection area for 10 seconds. 	<p><i>[Instructor Note: Use instructions at the left are for the correct use of an EpiPen® epinephrine autoinjector trainer. If using a different manufacturer’s training device, students should follow the manufacturer’s instructions for use.]</i></p>	

END PERFORMANCE EVALUATION

Successfully Completed. Not Successfully Completed. Remediation Required.

Signature of HSI Authorized Instructor _____ HSI Instructor Registry Number: _____