

## EMERGENCY PLAN FOR ALLERGIC REACTIONS

**ALLERGY TO:** \_\_\_\_\_

Child's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Does the child have asthma?

Yes\*\*  No

\*\*High Risk for severe reaction

**SIGNS OF AN ALLERGIC REACTION:**

**SYSTEMS**

- Mouth
- Throat
- Skin
- Gut
- Lungs
- Heart

**SYMPTOMS**

Itching & swelling of the lips, tongue, or mouth  
Itching and/or a sense of tightness in the throat, hoarseness, and/or hacking cough  
Hives, itchy rash, and/or swelling about the face or extremities  
Nausea, abdominal cramps, vomiting, and/or diarrhea  
Shortness of breath, repetitive coughing, and/or wheezing  
"Thready" pulse, fainting

The severity of symptoms can quickly change. All of the above symptoms can potentially progress to a life-threatening situation.

**Action for MINOR reaction:**

If symptom(s) are: \_\_\_\_\_

• **Administer:** \_\_\_\_\_  
Medication/dosage/route

• **Then call: Parent/Guardian and Health Care Provider**

• **If condition does not improve within 10 minutes, follow steps for Severe Reaction below:**

**Action for SEVERE reaction:**

If symptom(s) are: \_\_\_\_\_

• **Administer:** \_\_\_\_\_ **IMMEDIATELY!**  
Medication/dosage/route

• **Call: 911 (Never hesitate to call 911)**

• **Call: Parent or Guardian**

• **Call: Health Care Provider**

Parent/Guardian Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Health Care Provider Name: \_\_\_\_\_

Health Care Provider Signature (Required): \_\_\_\_\_ Date: \_\_\_\_\_

## Emergency Contacts

1. \_\_\_\_\_

Relation: \_\_\_\_\_ Phone \_\_\_\_\_

2. \_\_\_\_\_

Relation: \_\_\_\_\_ Phone \_\_\_\_\_

3. \_\_\_\_\_

Relation: \_\_\_\_\_ Phone \_\_\_\_\_

## Trained Staff Members

1. \_\_\_\_\_ Room \_\_\_\_\_

2. \_\_\_\_\_ Room \_\_\_\_\_

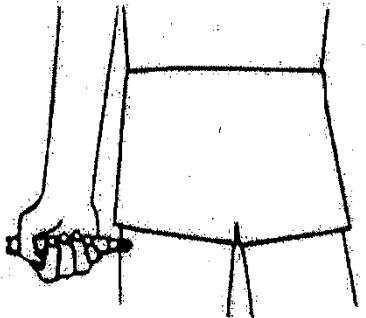
3. \_\_\_\_\_ Room \_\_\_\_\_

EPIPEN® and EPIPEN® Jr. Directions

### 1. Pull off gray activation cap.



### 2. Hold black tip near outer thigh (always apply to thigh).



3. Place firmly against thigh and press until Auto-injector mechanism functions. **Hold in place and count to 10.** The EpiPen unit should then be removed and taken with you to the Emergency Room. Massage the injection area for 20 seconds.