

SEVERE ALLERGY POLICY (INCLUDING PEANUTS AND TREE NUTS):

****As a precaution, all classrooms are peanut/ tree nut free for the first two weeks of school.****

Identification of children needing emergency medications:

Parents should review pertinent information with teachers before each school year or special activity such as school trips.

Information will be readily available and reviewed by school personnel on an identification sheet including child's name and photo, specific allergy, warning signs of reaction, and emergency treatments.

Parents of children with allergies will be encouraged to have their children wear some kind of identification such a Medic-Alert bracelet or necklace.

Teacher Preparedness:

All school personnel will be made aware of students who have allergies and prescribed emergency medications such an epinephrine device.

Food service people will be made aware of what foods need to be avoided because of student allergies.

All school personnel will undergo basic First-Aid and CPR regularly. This would include additional formal training on how to use epinephrine devices.

Classroom Preparedness:

Avoidance is the primary aspect of allergy management!!

Classroom teacher will make an announcement at Back to School night about any food allergies known in the class and publish the same information in the take-home packet. Parents will be asked to check all ingredients in any classroom treats that are brought in to the classroom.

A list of allergen free treats can be made up by parents of allergic children to share with classroom parents who will be bringing in treats.

There will be no lunch exchanging within peanut-free/nut-free classrooms.

When parents call to arrange to bring in treats, teachers will remind them of any foods to avoid for allergic reactions and ask them to read all food ingredients to check for safety.

Parents of children with allergies could leave acceptable treats in the room should a situation arise of food being brought that is not acceptable for their child.

Medications:

Epinephrine injection is the most likely treatment and should be used immediately in the case of anaphylactic shock (breathing difficulties and drop in blood pressure or shock), as it is potentially fatal.

Treatment protocols will follow written and signed physician's instructions (including recognition of reaction) for administration of medications. The parents also sign these instructions, giving school personnel permission to administer, in addition to submitting an Oral Medication Authorization form to the office.

Every student with a prescription should have the epinephrine device clearly labeled with the student's name and the teacher's name.

School personnel will be instructed about the location of the medications. Epi-pens will be kept in easily accessible locked locations.

Adult supervision is mandatory. The reaction may prevent a child from completing self-administration.

All medications go home with students at the end of the school year.