BLUE•FISH

PEDIATRICS www.bluefishmd.com Allergy Action Plan Emergency Care Plan D.O.B. / / Name:

Weight: Ibs **Asthma:** \Box Yes (higher risk for a severe reaction) \Box No

Extremely reactive to the following foods: THEREFORE:

- □ If checked, give epinephrine immediately for ANY symptoms if the allergen was *likely* eaten.
- □ If checked, give epinephrine immediately if the allergen was *definitely* eaten, even if nosymptoms are noted.

Any SEVERE SYMPTOMS after suspected or known ingestion:

One or more of the following:

Allergy to:

LUNG: Short of breath, wheeze, repetitive cough HEART: Pale, blue, faint, weak pulse, dizzy, confused THROAT: Tight, hoarse, trouble breathing/swallowing MOUTH: Obstructive swelling (tongue and/or lips) SKIN: Many hives over body

Or **combination** of symptoms from different body areas: SKIN: Hives, itchy rashes, swelling (e.g., eyes, lips) GUT: Vomiting, diarrhea, crampy pain

MILD SYMPTOMS ONLY:

MOUTH: Itchy mouth SKIN: A few hives around mouth/face, mild itch GUT: Mild nausea/discomfort

Medications/Doses:

Epinephrine: EpiPen/AuviQ 0.3 mg IM	Antihistamine: See weight chart on back	Other (e.g. inhaler-bronchodilator if asthmatic):
Or EpiPen Jr./AuviQ 0.15 mg IM		Albuterol or Xopenex 4-8 puffs or 1-2 nebulizer treatments PRN

Monitoring

Stay with student; alert healthcare professionals and parents. Tell rescue squad epinephrine was given; request an ambulance with epinephrine. Note time when epinephrine was administered. A second dose of epinephrine can be given 5 minutes or more after first if symptoms persist or recur. For a severe reaction, consider keeping student lying on back with legs raised. Treat student even if parents cannot be reached. See back/attached for auto-injection technique.

Travel

Please allow family to travel with above medications and to utilize them in the event of a food reaction.

1- INJECT EPINEPHRINE

3- Begin monitoring (see box below)

*Antihistamines & inhalers/bronchodilators

2-Stay with student; alert healthcare

3-If symptoms progress (see above),

4-Begin monitoring (see box below)

are not to be depended upon to treat a severe reaction (anaphylaxis). USE

1-GIVE ANTIHISTAMINE

professionals and parent

USE EPINEPHRINE

-Inhaler (bronchodilator) if asthma

4-Give additional medications*:

IMMEDIATELY 2- Call 911

EPINEPHRINE.

-Antihistamine

BLUE-FISH

P E D I A T R I C S www.bluefishmd.com

EPIPEN Jr AD

Pull off blue safety release.

Swing and firmly push orange tip against outer thigh so it dicks

AND HOLD on thigh approx. 10 seconds to deliver drug.

> Seek emergency medical attention.

A food allergy response kit should contain at least two doses of epinephrine, other medications as noted by the student's physician, and a copy of this Food Allergy Action Plan. A kit must accompany the student if he/she is off school grounds (i.e. field trip). Contacts Call 911 (Rescue Squad (_)) Doctor: <u>Blue Fish Pediatrics</u> Phone: (<u>713) 467 - 1741</u> Parent/Gaurdian: Phone: (_) Other Emergency Contacts: Name/Relationship: Phone: (_) Name/Relationship: Phone: (_)		
Call 911 (Rescue Squad () -) Doctor: Blue Fish Pediatrics Phone: (713) 467 - 1741 Parent/Gaurdian: Phone: () - Other Emergency Contacts: Name/Relationship: Phone: () - Name/Relationship:	HING EPHRIERE SANJECTOR	epinephrine, other medications as noted by the student's physician, and a copy of this Food Allergy Action Plan. A kit must accompany the student if he/she is off school
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Antihistamine Dosing Chart

Children's Loratadine/Cetirizine/Levocetirizine (Claritin/Zyrtec/Xyzal) Dosing		
Age	Dose: Liquid (1mg/1mL)	
6 months – 12 months	1.25 mL once or twice daily, do not take more than 2.5 mL in 24 hours	
1-2 years	2.5 mL once or twice daily, do not take more than 5 mL in 24 hours	
2-6 years	5 mL once daily, do not take more than 5 mL in 24 hours	
6+ years	5 - 10 mL once or twice daily, do not take more than 20 mL in 24 hours	

Children's Fexofenadine (Allegra) Dosing		
Age	Dose: Liquid (30mg/5mL)	
6 months - 2 years	2.5 mL once or twice daily, do not take more than 5 mL in 24 hours	
2 – under 11 years	5 mL once or twice daily, do not take more than 10 mL in 24 hours	
12 years and older	10 mL once or twice daily, do not take more than 20 mL in 24 hours	

Children's Diphenhydramine HCL (Benadryl) Allergy Dosing (1+ Years Old)					
Weight (pounds)	Dose: Liquid (12.5 mg/5mL)	Dose: Chewable (12.5 mg)	Dose: Capsule (25 mg)		
20 – 24 Ibs.	3.75 mL every 6 hrs, no more than 15 ml in 24 hrs	N/A	N/A		
25 – 37 Ibs.	5 mL every 6 hrs, no more than 20 ml in 24 hrs	1 tablet every 6 hrs, no more than 4 tablets in 24 hrs	N/A		
38 – 49 Ibs.	7.5 mL every 6 hrs, no more than 30 ml in 24 hrs	1 ¹ / ₂ tablets every 6 hrs, no more than 6 tablets in 24 hrs	N/A		
50 – 99 Ibs.	10 mL every 6 hrs, no more than 40 ml in 24 hrs	2 tablets every 6 hrs, no more than 8 tablets in 24 hrs	1 capsule every 6 hrs, no more than 4 caps in 24 hrs		

*USE OF DIPHENHYDRAMINE (BENADRYL) IS GENERALLY DISCOURAGED, unless otherwise directed by a physician. Newer allergy medications such as Cetirizine (Zyrtec), Loratadine (Claritin), and Fexofenadine (Allegra) are just as effective, work just as quickly, last longer with less frequent dosing, and are safer with far fewer side effects.