

STINGING INSECT ALLERGY & ANAPHYLAXIS EMERGENCY CARE PLAN

Student Name		DOB	
School		Grade	
Parent/Guardian		Phone	
Healthcare Provider		Provider Phone	

ALLERGY TO:

☐ Hymenoptera family (bee, wasp, yellow jacket, hornet) ☐ Fire Ant ☐ Other: _____

SPECIAL CIRCUMSTANCE: ☐ If this box is checked, the child has an extremely severe allergy to stinging insects. Even if the child has MILD symptoms after a sting, Give Epinephrine immediately

SEVERE REACTION (ANAPHYLAXIS) SIGNS

Skin: hives, widespread itching, swelling

Breathing: wheezing, cough, trouble breathing, throat tightness

Stomach: repeated vomiting, severe abdominal pain

Heart/Brain: dizziness, fainting, confusion, pale appearance

If ONLY mild symptoms occur at sting site: - Itchy or runny nose, sneezing - Itchy mouth - A few hives, mild itch - Mild nausea - Mild local swelling	- Monitor student. - Give antihistamine, listed below. - Notify parent/guardian as appropriate.
If symptoms involve more than one body system OR breathing, throat, or heart/brain symptoms OR severe signs listed above	GIVE EPINEPHRINE IMMEDIATELY.
After epinephrine is given:	Call 911. Contact parent/guardian. Student should be evaluated by emergency medical services.

MEDICATIONS

Epinephrine Auto-Injector: ☐ 0.1 mg ☐ 0.15 mg ☐ 0.3 mg

OR Neffy 1 spray of ☐ 0.1mg ☐ 0.2mg

Antihistamine: _____

If no improvement in 5-15 minutes, repeat dose of epinephrine. For Neffy, give in same nostril.

EMERGENCY STEPS

Administer epinephrine immediately when criteria above are met.

Call 911 and report suspected anaphylaxis from a stinging insect sting.

Keep student lying down with legs elevated if tolerated.

Monitor breathing and circulation until EMS arrives.

Give second epinephrine dose if symptoms persist and prescribed by provider.

Authorized Healthcare Provider Signature: _____ **Date:** _____

Parent/Guardian Signature: _____ **Date:** _____