Outline for Anaphylaxis Class August 6, 2025

1. What is anaphylaxis?

A severe, potentially life-threatening allergic reaction. Symptoms can impact several areas of the body. Symptoms usually occur within 2 minutes - 2 hours after exposure to the allergen. Symptoms may be severe and involve more than one body system.

1. Causes of anaphylaxis
2. The BIG 9 foods

Milk Egg Peanut Soy Wheat

Treenut Shellfish Shellfish Sesame

1. Insects
2. Medications - most common:

Antibiotics Aspirin & NSAID’s Anticonvulsants Chemotherapy

Monoclonal Antibody Therapy

1. Latex
2. Exercise
3. Idiopathic
4. Immunotherapy
5. Certain biologic agents, such as chemo or radiology dyes
6. Symptoms

Symptoms can:

Vary from individual to individual

Vary in intensity

May develop rapidly or progress over time

[Recognize-and-Respond-to-Anaphylaxis-common-symptoms\_4.25 (1).pdf](https://drive.google.com/file/d/10wHVqwv0PYekE5i-mGQjCfRosLGwMkjt/view?usp=drive_link)

1. Skin: hives, itching, flushing, redness, swelling- especially of lips, tongue and face, angioedema, pale, cyanosis
2. Respiratory: difficulty breathing, wheezing, coughing, throat tightness, hoarseness, shortness of breath, a feeling of a lump in their throat, stridor, nasal congestion, runny nose
3. Cardiovascular: rapid or slow heart rate, sudden drop in BP, dizziness, lightheadedness, fainting and chest pain
4. GI: nausea, vomiting, diarrhea, stomach cramps, and abdominal pain
5. Neuro: anxiety, confusion, a feeling of impending doom, slurred speech
6. Other: Metallic taste, sweating, tingling in mouth or throat, watery eyes

1. [How a child may describe the symptoms](https://drive.google.com/file/d/1P9YYxE31aroPCxYyItbMSr8QlSOh2Nzt/view?usp=sharing) (From the Food Allergy Research and Education)
2. My stomach/tummy hurts
3. My skin is itchy
4. My tongue is hot/burning/itchy/tingly
5. My mouth is itching/tingling/feels hot
6. It feels like there is a hair on my tongue
7. There’s a bump in the back of my throat
8. My lips feel funny/tight
9. My eyes are burning/itching
10. There’s bumps on me/bumps in my mouth
11. There’s a weird taste in my mouth
12. Something’s wrong/something bad is happening
13. Child may pull at their tongue, their ears, their throat
14. Diagnosis
15. Clinical Picture
16. Review of history (precipitating factors)
17. Referral to allergist

Can do blood tests or skin tests

1. Treatment

[FARE Food Allergy and Anaphylaxis Emergency Care Plan](https://drive.google.com/file/d/1f3dHw93hlfz_Qw8RAVj04DcQYj0SNOIR/view?usp=drive_link)

1. Follow the students anaphylaxis plan
   1. Mild Symptoms from a SINGLE body system-
      1. Stay with person and observe them closely
      2. Administer antihistamine if ordered on the individual's plan
      3. Call emergency contacts
   2. For mild symptoms from more than ONE body system- give Epinephrine
   3. For any severe symptoms - give Epinephrine
2. Complications of Anaphylaxis
   1. Shock
   2. Respiratory Arrest
   3. Cardiac Arrest
   4. Death
3. Prevention
   1. Strict Avoidance of the Allergen -
      1. Read labels carefully, ask questions
   2. Education of Student, Staff, Family and Friends
   3. Inform family, friends about your LTA
      1. Wear a medic alert bracelet
   4. Always carry two doses of Epinephrine
4. Therapies
   1. Omalizumab (Xolair)
      1. Approved for ages 1-55 yo
      2. 16 weeks of treatment
      3. 70% people got to threshold
      4. Got FDA approval as a parachute
      5. Expectation is decreased reaction from an accidental exposure
      6. Only works as long as you take it- more research being done
   2. Oral Immunotherapy
      1. Only works on that food
      2. Provides “bite safety” from accidental exposure
5. Disparities and Inequities

Insurance- who covers what and what is the co-pay?

1. Reasons to have Stock Epinephrine in the School Setting
2. Undiagnosed allergies (20% were unknown allergies)
3. Prompt treatment - is imperative!
   1. sometimes people carry expired Epinephrine
   2. Human error- they don’t have their Epinephrine
   3. Failed mechanism in the person’s own Epinephrine
   4. Increased safety for all students (and staff)
   5. Best practice
4. The School Nurse can maintain it- make sure it is accessible and not expired

11. Mistakes in anaphylaxis

1. Epinephrine is not available - person doesn't have it!
2. There is a delay in administration - child isn’t brought to nurse
3. People fail to recognize anaphylaxis
4. Not calling 911
5. Administration issues with injectable epinephrine
   1. Incorrect administration site
   2. Not holding the device in place long enough for medication to administer
   3. Holding the device incorrectly and injecting self
   4. Not removing the safety cover(s)
   5. Not applying enough force to activate device
6. Teaching Modalities for the School Nurse

Video

Powerpoint

Competency return demonstration

[LPS Checklist](https://docs.google.com/document/d/1wmwz90rxBv3THpsGXS6sv5oVWOXnH7qqsI2oFlDxaEs/edit?tab=t.0)

[MA DPH Checklist](https://drive.google.com/file/d/1tbeUL6H_LHJlyXkDkzhoQzUSwXcD5veL/view?usp=sharing)

1. Important Takeaways
   1. Always have a PLAN for each student (pictures are helpful on plan- swelling)
   2. Follow the plan
   3. Document what you do
   4. Delegate - know who you can count on- especially if the person who is supposed to do the task- won’t be able to execute