**Plano Independent School District**

**School Health**

**Problem List - Anaphylaxis**

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| **Observation** | **Reason/Action** |
| Suspected or reported exposure to allergen/ no symptoms | Review action plan for steps |
| Suspected or reported exposure to allergen/with progressing symptoms | Follow action plan/ give epinephrine via syringe or auto injector as prescribed/follow guidelines |
| Accidently injected self with epinephrine auto- injector | Notify Workers Compensation |
| Medicine did not inject into patient but injected prior to needle insertion | Use second dose if provided |
| Gray color EpiPen | This is a practice trainer and containers no medication and has no needle. Use EpiPen with blue safety release and orange tip. |