

**Regulation**

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LIFE THREATENING FOOD ALLERGIES

Food allergies can be life threatening. The risk of accidental exposure to foods can be reduced in the school setting when the school works with students, parents/guardians, medical personnel and staff to provide a safe educational environment for food-allergic students.

Protocol

The following protocol shall be followed when a student has a life threatening food allergy:

- A. The parent/guardian shall notify the district that the student has a life threatening food allergy;
- B. The information shall be relayed to the school nurse. The school nurse shall communicate with the parent/guardian and collect medical documentation, medication, physician's instructions and written authorization and consent forms required by law;
- C. The school nurse shall review the information and send it to the school physician for review;
- D. After the school physician confirms that the student does have a life threatening food allergy, the school nurse shall notify the building principal, teachers, supervisors, staff members and transportation department;
- E. The school nurse shall develop an individualized food allergy action plan and an individual healthcare plan (IHP) for the student;
- F. The school nurse shall educate instructional staff members, cafeteria assistants, playground aides and school bus drivers on the signs and symptoms of anaphylaxis, including how children may describe their symptoms, and appropriate responses (call the school nurse or dial 911). Teachers will be reminded to encourage students to wash hands before and after lunch as part of an appropriate hygiene procedure;
- G. District school nurses, as well as other staff designated by the superintendent, shall participate in CPR/AED training workshops annually to maintain up-to-date, contemporary certification in these areas;
- H. The director of buildings and grounds shall educate and train all custodial staff regarding the procedures for keeping all designated surfaces sanitary and allergen free;
- I. School bus drivers will be issued a life threatening allergies laminated card for their school bus with the student's picture, asthmatic status, emergency protocol, signs and symptoms of an allergic reaction list, and words children may use to describe a reaction. This card shall only be issued with the parent's/guardian's consent;
- J. The transportation coordinator shall notify school bus drivers who are transporting a child with a life threatening food allergy. When a child shows signs or symptoms of anaphylaxis the following school bus emergency Action Plan will be followed:
  - 1. The bus driver will call 911;
  - 2. The school bus driver will notify the transportation department of the situation and the bus route;
  - 3. The transportation department will contact the building principal and school nurse;
  - 4. The school will notify the parent/guardian;
  - 5. The school bus driver, in cooperation with the transportation department, will decide whether to meet a first responder or proceed to the school, the home, or the hospital or medical center, depending on which can be reached the most quickly;

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- K. The transportation department will send home, along with the district bus passes, the principal's letter alerting parents/guardians of the life threatening food allergy and providing suggested guidance to follow;
- L. The building principal shall send a notification letter to parents/guardians whose child is in the food-allergic student's class;
- M. The building principal will contact the food-allergic student's parents/guardians to obtain consent to post medical alert posters in designated classrooms, food serving areas and on the school bus. When consent is received the alert shall be posted;
- N. The building principal may request consent from parents/guardians for the student's picture to be taken for use on the posters;
- O. The parent/guardian shall notify the school nurse in writing of any changes in the student's condition, such as changes in medications or dosages, or a change in the number and severity of the items to which the child is allergic;
- P. The district will follow the appropriate steps to ensure that the most current information available is reflected in the student's records.

Nurse's Guidelines for Completing Individual Healthcare Plans

The Individual Healthcare Plan (IHP) should include the following information:

- A. Student's health history;
- B. Current information and assessment;
- C. Preparer's signature and the date;
- D. Goals, such as:
  1. Avoiding contact;
  2. Controlling the environment;
  3. Recognition of symptoms;
  4. Accessing medication in an emergency;
  5. Educating faculty and staff;
- E. The IHP shall include nursing diagnosis and/or student problems, along with suggested intervention and the outcome/evaluation. Some examples of diagnosis/student problems and suggested interventions are:

Parties:	Teacher will notify parent/guardian, building administration and school nurse of all upcoming parties so appropriate food can be provided for child by parent/guardian
Lunchroom Seating: Grades Pre K- 3:	Parent/guardian will determine if child sits at the "acknowledge specific allergy free table"
Grade 4 – 5:	Parent/guardian will determine if child sits at the "acknowledge specific allergy free table"
Grades 6 – 12:	Student will self-determine where he/she will sit
Alert Poster:	Parent/guardian shall consent in writing to the use of a poster for child

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Bus:	Transportation department will determine seating location
Self-Administration of Medication:	As per physician's instructions and board policy 5141.21 Administering Medication
Notification of Staff:	Written parent/guardian consent shall be obtained to notify staff regarding the life threatening allergy when student picture is used on a BRSD document and if no picture is used, notify staff regarding the life threatening allergy
Field Trips:	Discuss appropriate strategies with appropriate chaperoning faculty and staff for managing the food allergy
Establishment of Cleaning Procedures:	In consultation with maintenance
In Case of Allergic Reaction:	Child will be medicated as determined by physician authorizing treatment 911 call for transport to emergency room Vital signs will be monitored Parent/guardian will be called District will follow K-12 protocol

How A Child Might Describe An Allergic Reaction

Children have unique ways of describing their experiences and perceptions including allergic reactions. Precious time is lost when adults do not immediately recognize that a reaction is occurring or do not understand what the children might be telling them.

Following are examples of the words a child might use to describe a reaction.

1. I can not breathe;
2. I do not feel good or I do not feel right;
3. This food is too spicy;
4. My tongue is hot (or burning);
5. It feels like something's poking my tongue;
6. My tongue (or mouth) is tingling (or burning);
7. My tongue (or mouth) itches;
8. My tongue feels like there is a hair on it;
9. My mouth feels funny;
10. There's a frog in my throat;
11. There's something stuck in my throat;
12. My tongue feels full (or heavy);
13. My lips feel tight;
14. It feels like there are bugs in my ears (describing itchy ears);
15. My throat feels thick;
16. It feels like a bump is on the back of my tongue (or throat).

Information Resource

For additional information, visit the Food Allergy and Anaphylaxis Network website ([www.foodallergy.org](http://www.foodallergy.org))

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