Aquarium of the Pacific Food Allergy and Anaphylaxis Protocol

Purpose Statement:

The Aquarium of the Pacific recognizes the increasing prevalence of allergies in children, including many life threatening allergies. The Education Team has created a protocol to minimize risk exposure for children with life threatening allergies, to educate our staff on how to recognize and respond to allergic reactions promptly, and to plan for the social, recreational, health and educational needs of these children.

The Aquarium of the Pacific desires to extend fun and educational experiences for all children.

Background Information:

The number of children with life threatening allergies (including food, medication, insect stings, and latex allergies) increases each year. Allergic reactions can range from moderate to life threatening anaphylactic reactions. Anaphylaxis is a serious allergic reaction that can affect multiple systems in the body including breathing, heart irregularities, and blood pressure drop or shock and loss of consciousness. If anaphylactic shock is not treated immediately it can be fatal.

Symptoms of anaphylaxis include:

- Tingling sensation
- Itching of eyes or face
- Metallic taste in the mouth
- Hives
- Warm sensation
- Wheezing or difficulty breathing
- Coughing
- Swelling of the mouth or throat
- Vomiting
- Abdominal pain
- Diarrhea
- Cramping
- Drop in blood pressure
- Loss of consciousness

Some children might describe how their symptoms feel as follows (from the Food Allergy & Anaphylaxis Network):

- “This food is too spicy.”
- “My tongue is hot (or burning).”
- “It feels like something is poking my tongue.”
• “My tongue (or mouth) is burning.”
• “My tongue itches.”
• “My tongue feels like there is hair on it.”
• “My mouth feels funny.”
• “There’s a frog in my throat.”
• “There’s something stuck in my throat.”
• “My tongue feels full (or heavy).”
• “My lips feel tight.”
• “It feels like there are bugs in my ears.”
• “My throat feels thick.”
• “It feels like a bump is on the back of my tongue (or throat).”

In some cases the symptoms can go away only to return one to three hours later in what is called a biphasic reaction. These second sets of reactions can be more dangerous than the first.

Anaphylaxis is treated by an intramuscular injection of epinephrine. Epinephrine is adrenaline and quickly reverses anaphylactic symptoms. Epinephrine is usually administered through an automatic injection device commonly called an Epi-pen in the thigh of the affected person. Prompt medical attention is critical for people in anaphylaxis and/or injected with epinephrine.

**Protocols:**

**Education and Training**

The Aquarium of the Pacific will provide education and training to all education staff supervising children participating in school and public programs on management of life threatening allergies. This training will address prevention, recognition of anaphylactic symptoms, privacy and dignity of the child with life threatening allergies, role and responsibilities of staff members in an emergency, and the emergency response plan which includes administering epinephrine and contacting emergency responders.

**Individualized Planning and Accommodations**

An individual health plan will be created for each child with an allergy. The camp allergy coordinator will work with the parent or guardian of the child to create a fun, safe, and dignified learning environment. The parent or guardian will communicate their child’s specific health and social needs as well as provide a Food Allergy and Anaphylaxis Emergency Care Plan (FAAECP) for emergency situations. This FAAECP will be given to all staff working with their child.

**Classroom Management Procedures**

Individualized and appropriate accommodations will be made to minimize risk to the child with life threatening allergies. These accommodations may include:

- Cleaning with all purpose cleaners before, during, and after activities, snack, or lunch time.
• Strict policies forbidding children to share or trade snacks.
• Removal off all latex gloves from the classroom.
• Food items that cause allergic reactions according to the FAAECP will not be used for any educational activities.
• Other procedures as needed.

**Emergency Response Procedures**

In the event of a life threatening emergency, all education staff members supervising children will:

• Be trained on how to recognize anaphylactic symptoms.
• Make efforts to know the location of the child’s individualized FAAECP and medications.
• Be familiar and confident with use of an epinephrine automatic injector or Epi-pen.
• Have a radio as a means of communication with our Security Department to call for emergency medical personnel.
• Identify themselves, their location, the nature of the allergic reaction, and the administration of the Epi-pen to the answering Security officer.
• The Security Department will coordinate the prompt arrival of emergency responders to the child’s location in the Aquarium.
• Call Education Management to coordinate an Education staff member that the child is familiar with to accompany the child in the ambulance to the hospital. Education management will then call the parent or guardian to inform them of the situation.
• Keep the affected child under constant care and supervision until emergency responders arrive.

**Procedures for Handling Epinephrine**

Parents or guardians of the child with allergies must provide current Epi-pens in good working condition for their child. Each parent will provide a current FAAECP signed by a physician. Guidelines for administering epinephrine will be included in the FAAECP. The lead educator(s) will carry these on their person at all times while the child is under the Aquarium’s supervision.

**Responsibilities:**

Minimizing the risk of potential life threatening anaphylactic allergic reactions is a serious task that will require many people working together to achieve.

**Family**

• Notify the camp allergy coordinator of your child’s allergy.
• Provide a FAAECP to the camp allergy coordinator
  o Provide medical documentation from the child’s allergist regarding the specific food allergen(s) to the camp allergy coordinator
  o Provide a list of foods and/or ingredients that can cause life threatening reactions to the camp allergy coordinator
• Provide the appropriate medications on the day of the program.
• Speak with the camp allergy coordinator to discuss a physician approved individual health plan. The Parent is responsible for keeping the FAAECP current by notifying the camp allergy coordinator of any changes. New or updated FAAECPs must be signed by the child’s physician.
• Provide your child with safe snacks and meals as appropriate for the program.
• Notify camp allergy coordinator if a preferred cleaner is required to remove allergens from the room.

Education Management

• Provide annual training for all Education staff members that will supervise children. The training will include: information on food allergies, how to identify anaphylactic shock, how to respond in the event of an allergic reaction, and the use of an Epi-pen.
• Provide radios or other means of communication to education staff members supervising children.

Camp Allergy Coordinator

• Meet with the parent or guardian to discuss a physician approved individual health plan.
• Communicate the individualized health plan and FAAECP to educators leading the program and arrange for a meeting with the parent or guardian if needed.
• Consult with the parent or guardian and educators leading the program to develop a classroom protocol to accommodate the child’s specific needs; including clean-up procedures, allergy free tables for eating, etc.
• Maintain a list of all staff members trained to use an Epi-Pen. Assign staff members trained in the use of Epi-Pens to be present when a child with a severe allergy is present in the classroom, tour, or any other aspect of the child’s educational experience.
• Ensure that all Education staff members that will supervise children will attend an annual training provided by management.

Lead Educator(s)

• Be trained to recognize symptoms of allergic reactions and understand the child’s FAAECP and classroom protocol, including the use of an Epi-pen.
• Consult with the camp allergy coordinator to develop a classroom protocol to accommodate the child’s specific needs; including clean-up procedures, allergy free tables for eating, FAAECP.
• Instruct and remind all children that sharing or trading food during the program will not be allowed.
• Ensure that all children and staff wash their hands before and after eating.
• Inform parents or guardians of allergic child of any classroom activities that make use of food items and provide product labels for their approval. If any food item is not safe for the child to be around that food item can be substituted for another safe item or not used at all.
• At no time will an educator make decisions to allow food to be given to a child with known allergies unless that food was approved by a parent or guardian.
• Carry a radio for communication, the child’s FAAECP, and any emergency medications on their person at all times while supervising the child with allergies.
• Be aware of how other students are interacting with the allergic child to prevent teasing and harassment.

Waiver:

Please go to the following website to complete a Food Allergy & Anaphylaxis Emergency Care Plan (FAAECP). Your child may not participate in any Aquarium programming until we have this paperwork filled out, signed by a physician, and all pertinent medications.
Name: ___________________________________________ D.O.B. __________________

Allergy to: __________________________________________________________________　　Weight: __________________ lbs.

Asthma: [ ] Yes (higher risk for a severe reaction) [ ] No

For a suspected or active food allergy reaction:

FOR ANY OF THE FOLLOWING SEVERE SYMPTOMS

[ ] If checked, give epinephrine immediately if the allergen was definitely eaten, even if there are no symptoms.

LUNG
Short of breath, wheezing, repetitive cough

HEART
Pale, blue, faint, weak pulse, dizzy

THROAT
Tight, hoarse, trouble breathing/swallowing

MOUTH
Significant swelling of the tongue and/or lips

SKIN
Many hives over body, widespread redness

GUT
Repetitive vomiting or severe diarrhea

OTHER
Feeling something bad is about to happen, anxiety, confusion

OR A COMBINATION of mild or severe symptoms from different body areas.

NOTE: Do not depend on antihistamines or inhalers (bronchodilators) to treat a severe reaction. Use Epinephrine.

1. INJECT EPINEPHRINE IMMEDIATELY.
2. Call 911. Request ambulance with epinephrine.
   • Consider giving additional medications (following or with the epinephrine):
     » Antihistamine
     » Inhaler (bronchodilator) if asthma
   • Lay the student flat and raise legs. If breathing is difficult or they are vomiting, let them sit up or lie on their side.
   • If symptoms do not improve, or symptoms return, more doses of epinephrine can be given about 5 minutes or more after the last dose.
   • Alert emergency contacts.
   • Transport student to ER even if symptoms resolve. Student should remain in ER for 4+ hours because symptoms may return.

NOTE: WHEN IN DOUBT, GIVE EPINEPHRINE.

MILD SYMPTOMS

[ ] If checked, give epinephrine immediately for ANY symptoms if the allergen was likely eaten.

NOSE
Itchy/runny nose, sneezing

MOUTH
Itchy mouth

SKIN
A few hives, mild itch

GUT
Mild nausea/discomfort

1. GIVE ANTIHISTAMINES, IF ORDERED BY PHYSICIAN
2. Stay with student; alert emergency contacts.
3. Watch student closely for changes. If symptoms worsen, GIVE EPINEPHRINE.

MEDICATIONS/DOSES

Epinephrine Brand: ____________________________
Epinephrine Dose: [ ] 0.15 mg IM [ ] 0.3 mg IM

Antihistamine Brand or Generic: ____________________________
Antihistamine Dose: ____________________________

Other (e.g., inhaler-bronchodilator if asthmatic): ____________________________

FORM PROVIDED COURTESY OF FOOD ALLERGY RESEARCH & EDUCATION (FARE) (WWW.FOODALLERGY.ORG) 8/2013
**EPIPEN® (EPINEPHRINE) AUTO-INJECTOR DIRECTIONS**

1. Remove the EpiPen Auto-Injector from the plastic carrying case.
2. Pull off the blue safety release cap.
3. Swing and firmly push orange tip against mid-outer thigh.
4. Hold for approximately 10 seconds.
5. Remove and massage the area for 10 seconds.

**AUVI-Q™ (EPINEPHRINE INJECTION, USP) DIRECTIONS**

1. Remove the outer case of Auvi-Q. This will automatically activate the voice instructions.
2. Pull off red safety guard.
3. Place black end against mid-outer thigh.
4. Press firmly and hold for 5 seconds.
5. Remove from thigh.

**ADRENACLICK®/ADRENACLICK® GENERIC DIRECTIONS**

1. Remove the outer case.
2. Remove grey caps labeled “1” and “2”.
3. Place red rounded tip against mid-outer thigh.
4. Press down hard until needle penetrates.
5. Hold for 10 seconds. Remove from thigh.

**OTHER DIRECTIONS/INFORMATION** (may self-carry epinephrine, may self-administer epinephrine, etc.):

Treat student before calling Emergency Contacts. The first signs of a reaction can be mild, but symptoms can get worse quickly.

**EMERGENCY CONTACTS — CALL 911**

<table>
<thead>
<tr>
<th>RESCUE SQUAD:</th>
<th>PHONE:</th>
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</thead>
<tbody>
<tr>
<td>DOCTOR:</td>
<td>PHONE:</td>
</tr>
<tr>
<td>PARENT/GUARDIAN:</td>
<td>PHONE:</td>
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**OTHER EMERGENCY CONTACTS**

<table>
<thead>
<tr>
<th>NAME/RELATIONSHIP:</th>
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