

Science Transforming Life®

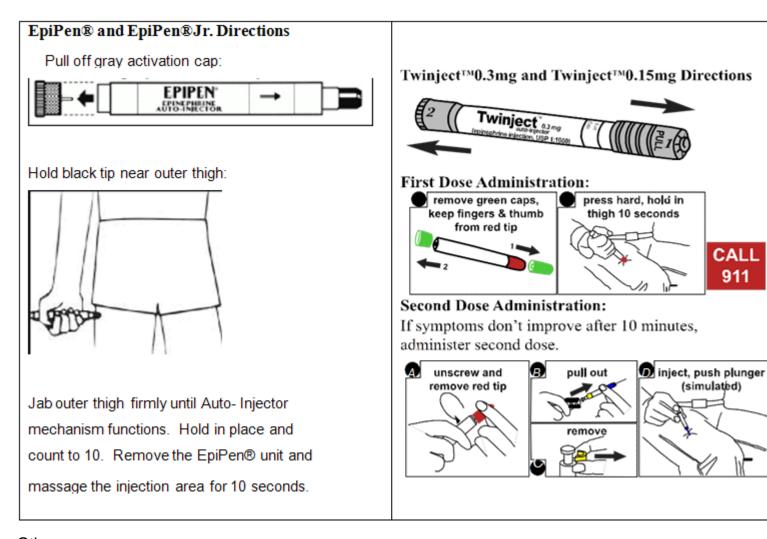
1400 Jackson Street Denver, CO 80206 303.388.4461 800.423.8891





National Jewish Health Food Allergy Action Plan

Name			D.O.B			
Care Giv	er					
Allergy to	0				Place Picture Here	
□ YES	□ NO	is known to have symptoms), given	had a previous life-threater ve eaten some of this food ve epinephrine & call 911 to te the antihistamine listed l	regardless of tl take the child t	ne presence of	
□ YES	□ NO	This child has asthma. If the child is known to have eaten some of this food and has any symptoms of asthma (coughing, wheezing or shortness of breath), give epinephrine & call 911 to take the child to the emergency room Then give the asthma rescue medication and antihistamine listed below.				·
Medication	on Dosa	ges:				
Epinephrine: inject intramuscularly in outer thigh (circle one) (see a				(see attached	instructions)	
EpiPen [®]		EpiPen [®] Jr.	Twinject™0.3mg	Twinject™0.1	5mg	
Antihistar	nine					
Asthma R	Rescue M	edication (if asthr	natic)			



Other

Step 1: Treatment

Sympt	toms:		Give Checked	d Medication(s):
•	Mouth-	- itching, tingling, or mild swelling of lips, tongue, mouth	☐ Epinephrine	$\sqrt{\text{Antihistamine}}$
	0	*Severe swelling of lips, tongue, mouth	$\sqrt{\text{Epinephrine}}$	$\sqrt{\text{Antihistamine}}$
•	Skin- f	lushing, hives, itchy rash	☐ Epinephrine	$\sqrt{\text{Antihistamine}}$
	0	*Widespread hives or swelling of the face, arms, legs, hands or feet	Epinephrine	√ Antihistamine
•	Gut- na	ausea, abdominal pain or cramping, vomiting, or diarrhea	☐ Epinephrine	$\sqrt{\text{Antihistamine}}$
	0	* Vomiting more than once; severe abdominal pain	$\sqrt{\text{Epinephrine}}$	$\sqrt{\text{Antihistamine}}$
•	Throat	- mild tightening of throat	☐ Epinephrine	$\sqrt{\text{Antihistamine}}$
	0	*Hoarseness, croupy or hacking cough, difficulty breathing	$\sqrt{\text{Epinephrine}}$	$\sqrt{\text{Antihistamine}}$
		in air or difficulty talking		
•	*Lungs	s- shortness of breath, repetitive coughing, or wheezing	$\sqrt{\text{Epinephrine}}$	$\sqrt{\text{Antihistamine}}$
			$\sqrt{\mbox{Asthma rescue med}}$ below (if asthmatic)	dication specified
•	*Heart	- low blood pressure, dizziness, fainting, pale, or blue skin	$\sqrt{\text{Epinephrine}}$	√ Antihistamine

 *If reaction is worsening (severa 	I of the above areas affected)	Epinephrine	√ Antihistamine					
*Potentially life-threatening: give epinephrine first, then give antihistamine! *If you think your child is having a severe reaction and needs epinephrine, give it. Do not wait to talk to a physician. *NOTE: The severity of the symptoms can quickly change.								
Step 2: Emergency Calls								
 Call 911 (or rescue squad :								
			25					
Name/Relationship	Phone Number(s)							
a.	1.	2.						
b.	1.	2.						
EVEN IF PARENT/GUARDIAN CANNOT BE REACHED, DO NOT HESITATE TO MEDICATE OR CALL 911 TO TAKE THE CHILD TO A MEDICAL FACILITY!								
Parent/Guardian Signature		Date						
Doctor's Signature		Date						

Once EpiPen[®] or Twinject[™] is used, call 9-1-1. Take the used unit with you to the Emergency Room. Plan to stay for observation at the Emergency room for several hours.

2. Room

Trained Staff Members