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| Performance Criteria | Evaluator’s Initials |
|  Identify signs and symptoms of anaphylaxis.  |  |
| Check for Food Allergy Action Plan.  |  |
| Locate student’s epinephrine or Epi-Pen.  |  |
| Take Epi-Pen out of box then out of tube.  |  |
| Grasp Epi-Pen with dominant hand with thumb closest to blue activation cap.  |  |
| Remove blue cap with other hand. Avoid touching orange tip after removing blue cap.  |  |
| Place orange end against outer mid-thigh (with or without clothing).  |  |
| Push down hard until a clinic is heard or felt.  |  |
| Keep Epi-Pen in place for 10 seconds then remove.  |  |
| Massage site for 10 seconds.  |  |
| Call 9-1-1.  |  |
|  Have student lie down and elevate legs.  |  |
| Call parent.  |  |
| May give second dose in 5 to 15 minutes if no improvement or if symptoms return.  |  |
|  Document the time the epi-Pen was used.  |  |
| Give used epi-pen to EMS personnel.  |  |

**Evaluator Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Employee Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**