



West Park C.E Primary School

Individual protocol for Antihistamine as an initial treatment protocol for mild allergic reaction (e.g. Piriton)

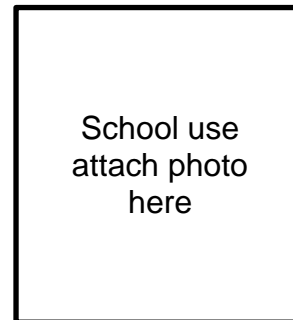
CHILD'S NAME.....

D.O.B.

Class

Nature of Allergy:

.....
.....



Contact Information

Name					Relationship to pupil			
Phone numbers	Work		Home		Mobile		Other	

If I am unavailable please contact:

Name					Relationship to pupil			
Phone numbers	Work		Home		Mobile		Other	

GP

Name:
Phone No:
Address:

Clinic/ Hospital Contact

Name:
Phone No:
Address:

MEDICATION - Antihistamine

Name of antihistamine & expiry date

- **It is the parents responsibility to ensure the Antihistamine has not expired**

Dosage & Method: **As prescribed on the container.**

- **It is the schools responsibility to ensure this care plan is reviewed and parents inform the school of any changes in condition or treatment.**

Agreed by: School Representative.....Date.....

I agree that the medical information contained in this plan may be shared with individuals involved with my child's care and education, and I give my consent to the school to administer anti-histamine as part of my child's treatment for anaphylaxis. I confirm I have administer this medication in the past without adverse effect.

Signed:.....Print name.....Date.....
I am the person with parental responsibility



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Individual protocol for using Antihistamine

Symptoms may include:

- Itchy skin
- Sneezing, itchy eyes, watery eyes, facial swelling (does not include lips/mouth)
- Rash anywhere on body

Inform
parent/guardian to
collect

.....
from school

Stay Calm

Reassure
.....

Give Antihistamine
delegated person
responsible to administer
antihistamine, as per
instructions on prescribed
bottle

Observe patient and
monitor symptoms

If symptoms progress and
there is any difficulty in
swallowing/speaking
/breathing/
cold and clammy
Dial 999

A = Airway
B = Breathing
C = Circulation

If child is prescribed an
adrenaline auto injector
administer it - follow
instructions on protocol

If symptoms progress Dial 999 - Telephone for an ambulance

You need to say: "I have a child in anaphylactic shock".

Give school details:

Give details: Pupils name has a severe allergy and what has happened.

**DO NOT PUT THE PHONE DOWN UNTIL YOU ARE SURE ALL THE NECESSARY INFORMATION
HAS BEEN GIVEN**

Someone to wait by the school gate to direct the ambulance staff straight to the child.