

POLICY 5066

Students with Potentially Life Threatening Allergies

A. Parent's Responsibility

1. The student's parent has the primary duty to inform school authorities about the child's potentially life threatening medical condition(s) upon registration of the child or upon medical diagnosis of the medical problem. Therefore, the student's parent or guardian shall:
 - a. Annually notify, in writing, the school of the child's allergies and, if not already on file with the school, provide written ~~medical providers~~ ~~physicians~~ verification of the child's allergies.
 - b. Work with the school to develop a plan that accommodates the child's needs, including an Allergy Emergency Response Plan. In the case of a child's potentially life threatening food allergy, develop a Student Food Allergy Action Plan with the appropriate school staff.
 - c. Provide written documentation, instructions, and medications as directed by a ~~medical providers~~ ~~physicians~~, using the Allergy Emergency Response Plan as a guide. Include a current photo of the child on the written form.
 - d. Provide properly labeled medications and replace medications after use or upon expiration.
 - e. Educate the child in self-management of their allergy, including, where applicable:
 - 1) Safe and unsafe foods;
 - 2) Strategies for avoiding exposure to unsafe foods, including how to read food labels (age appropriate);
 - 3) Symptoms of allergic reactions;
 - 4) How and when to tell an adult that the child may be having an allergy-related problem.

- f. Review the Student Food Allergy Action Plan and Allergy Emergency Response Plan with the appropriate school staff, the child's ~~medical providers~~ ~~physicians~~, and the child (if age appropriate) after a reaction has occurred.
- g. Provide emergency contact information, including the name, phone number, fax number, and address of the student's treating ~~medical providers~~ ~~physicians~~.

B. School's Responsibility

- 1. Registration procedures shall inquire as to whether or not a student has medical problems of which the school should be aware.
- 2. Review the health records and/or information submitted by parents and ~~medical providers~~ ~~physicians~~.
- 3. In developing a reasonable accommodation of the student with a potentially life-threatening food allergy, the following guidelines are recommended:
 - a. The school principal or principal's designee, classroom teacher(s), the parent(s), the student (as age appropriate) and a District nurse or other qualified person should develop the Student Food Allergy Action Plan. Other persons may be involved as determined to be necessary. In addition, the child's ~~medical providers~~ ~~physicians~~ should review the Student Food Allergy Action Plan.
 - b. Consideration in the Student Food Allergy Plan shall be given to:
 - 1) Elimination, whenever reasonably feasible, of allergens from meals, educational tools, arts and craft projects, and incentives;
 - 2) Education of the student, parent, community, staff, and food handlers;
 - 3) Appropriate standards of hygiene and maintenance for facilities and students;
 - 4) Classroom and school routines in light of the age, maturity, and ability of the student, and expectations regarding personal responsibility;
 - 5) Emergency procedures and preparation for such;
 - 6) Procedure to be followed should a "dangerous" food product be brought to the classroom.
 - c. Provide copies of the Allergy Emergency Response Plan to all staff who interact with the student on a regular basis, including substitute teachers.

- d. Enforce a “no eating” policy on school buses with exceptions made only to accommodate students with special nutritional needs.
4. Review the Student Food Allergy Action Plan and Allergy Emergency Response Plan with parent or guardian, student (as age appropriate) and **medical providers physicians** after a reaction has occurred at school or a school-related activity, and consider whether the plans need to be modified.

C. Emergency Injection for Anaphylaxis

1. In addition to students with known, potentially life-threatening allergies who have specific prescriptions for medication to respond to reactions, the following addresses the use of stock medications to treat reactions in others.
2. This policy does not create a duty or standard of care for a person to be trained in the use and storage of epinephrine auto-injectors, nor does it create a duty on the part of the District or a school to store epinephrine auto-injectors at a school (apart from the obligation to make an auto-injector available to trained individuals as set forth below). A decision to complete the training program described below and to make epinephrine auto-injectors available for emergency medical situations is voluntary. A school, school board, or school official may encourage a teacher or other school employee to volunteer for such training. A school, the school board, or a school official may not prohibit or dissuade a school employee from (a) being trained in use and storage of epinephrine auto-injectors, (b) possessing or storing an epinephrine auto-injector on school premises (if the employee is a qualified adult and the possession and storage is in accord with training), or (c) administering an epinephrine auto-injector (if the employee is a qualified adult and the administration is in accord with training).

[Utah Code § 26B-4-406 \(2023\)](#)

3. Each primary and secondary school shall make initial and annual refresher training regarding the storage and emergency use of an epinephrine auto-injector available to any interested teacher or other school employee, who is at least eighteen (18) years of age, who volunteers for such training. The training may be provided by the school nurse, or other person qualified to provide such training, designated by the school district **medical providers physicians**, the medical director of the local health department, or the local emergency medical services director.
 - a. A person who provides this training shall include instruction on:
 - 1) Techniques for recognizing symptoms of anaphylaxis;

- 2) Standards and procedures for the storage and emergency use of an epinephrine auto-injector;
 - 3) Emergency follow-up procedures, including calling the emergency 911 number and contacting, if possible, the student's **medical providers physicians** and a parent or guardian; and
 - 4) Written materials covering the information provided during training.
4. The volunteers shall retain for reference the written materials covering the information provided during training.

[Utah Code § 26B-4-406 \(2023\)](#)

5. A teacher or other school employee who has received the above training regarding the storage and emergency use of an epinephrine auto-injector becomes a "qualified adult" and:
- a. May obtain (along with the school nurse) from the school district **medical providers physicians**, the medical director of the local health department, the local emergency medical services director, a **medical providers physicians**, pharmacist, or any other person or entity authorized to prescribe or dispense prescribed medicines or drugs, a prescription for epinephrine auto-injectors;
 - b. May immediately administer an epinephrine auto-injector to a person exhibiting potentially life-threatening symptoms of anaphylaxis at school or a school activity when a **medical providers physicians** is not immediately available;
 - c. Shall initiate emergency medical services or other appropriate medical follow-up in accordance with the training materials after administering an epinephrine auto-injector.
6. Each primary or secondary school shall make an emergency epinephrine auto-injector available to any teacher or other school employee who is employed at the school and has become a "qualified adult." However, the school is not required to keep more than one emergency epinephrine auto-injector on the school premises so long as it may be quickly accessed by a teacher or other school employee who is a "qualified adult" in the event of an emergency.

[Utah Code § 26B-4-406\(5\) \(2023\)](#)

[Utah Code § 26B-4-409 \(2024\)](#)

7. A school may obtain a prescription for a supply of epinephrine auto-injectors for storage at the school and use by qualified adults if the school (a) designates an individual to complete an initial and annual refresher training program regarding the proper storage and emergency use of epinephrine auto-injectors and (b) stores the epinephrine auto-injectors according to Utah Department of Health standards.

[Utah Code § 26B-4-409\(5\) \(2024\)](#)

8. The following, if acting in good faith, are not liable in any civil or criminal action for any act taken or not taken under the authority of [§ 26B-4-406](#) et seq. with respect to an anaphylactic reaction: (a) a “qualified adult,” (b) a person who conducts training regarding the emergency use and storage of epinephrine auto-injectors, and (c) the District or its schools.

[Utah Code § 26B-4-410 \(2024\)](#)

D. Student’s Responsibility

1. The student will be proactive in the care and management of his or her food allergies and other reactions based upon the student’s developmental level, including the following:
 - a. Should not trade or share food, utensils, or containers with others;
 - b. Should not eat anything with unknown ingredients or know to contain any allergen;
 - c. Should notify an adult immediately if he or she eats something the student believes may contain the food to which he or she is allergic.
 - d. Know the location of his/her epinephrine auto-injector, if applicable, or other emergency medications.
 - e. Wash hands before eating.

E. Student Self-Administration of Epinephrine Auto-Injector **or nasal spray**

1. Under [Policy 5065 Administration of Medication](#), elementary and middle school students are prohibited from carrying or self-administering medication on school premises except in certain limited circumstances. However, elementary and middle school students may possess or possess and self-administer epinephrine auto-injectors **or nasal spray** provided that the student's parent or guardian has previously provided the school with a signed written request and written health care provider approval.

2. The written request must state that the parent or guardian authorizes the student to possess or possess and use the epinephrine auto-injector **or nasal spray** while acknowledging that the student is responsible for, and capable of, possessing or possessing and self-administering the epinephrine auto-injector **or nasal spray**.
3. The health care provider approval must state that the provider finds that it is medically appropriate for the student to possess or possess and self-administer an epinephrine auto-injector **or nasal spray** and the student should be in possession of the epinephrine auto-injector **or nasal spray** at all times.

[Utah Code § 26B-4-407\(4\) \(2023\)](#)

F. Medication Sharing Prohibited

1. No student is permitted to sell, share, or otherwise give to others any medication, prescription or non-prescription. Violations of this policy are subject to disciplinary action under the school's drug policies.

G. Resource Materials for Training

1. Training materials and information, along with other resource material relating to emergency administration of epinephrine, are available at the following:

[A Shot to Live, http://medicine.utah.edu/pediatrics/ashottolive/](http://medicine.utah.edu/pediatrics/ashottolive/)

Get Trained, <http://www.nasn.org/ToolsResources/FoodAllergyandAnaphylaxis/GetTrained>