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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: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**