

Rosemary Hills Elementary School

2111 Porter Road
Silver Spring, Maryland
Office of the Principal

Voice: 301-920-9990/301-650-6400
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September 2, 2016

Dear Parents/Guardians:

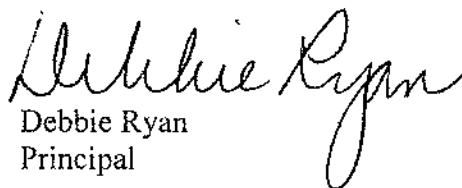
The health and well-being of your children is of utmost importance to Montgomery County Public Schools (MCPS). The Montgomery County Board of Education adopted Policy JPD, *Emergency Care for Students Experiencing Anaphylaxis*, and MCPS adopted Regulation JPD-RB, *Emergency Care for Students Experiencing Anaphylaxis*, to safeguard your children in the event of an emergency.

If your child has a known anaphylactic allergy, the *Annotated Code of Maryland*, Education Article, Section 7-426 states that parents/guardians are responsible for notifying schools of a child's special health care needs or diagnosis and providing appropriate medications. These medications may be kept in the school's health room for your child's use in case of an emergency. To do this, you will need to complete MCPS Form 525-14, *Emergency Care for the Management of a Student with a Diagnosis of Anaphylaxis: Release and Indemnification Agreement for Epinephrine Auto Injector* and deliver the properly labeled epinephrine auto-injector to school. The form may be obtained from your school nurse or from the following website at www.montgomeryschoolsmd.org/departments/forms/pdf/525-14.pdf.

We understand that parents/guardians or students may not know of an anaphylactic allergy until an emergency situation arises. Maryland requires that all schools train their staff members to recognize signs of anaphylaxis and maintain a stock supply of epinephrine auto-injectors (i.e., EpiPen) for use in case of an emergency. Designated staff members at each school are trained to administer EpiPens. Please be assured that whenever an epinephrine auto-injector is used, whether it belongs to your child or is one of the school's stock supply, 911 and you will be called.

If you have additional questions about this Montgomery County Board of Education policy and MCPS regulation, or the use of EpiPens in schools, please contact me or the school health nurse at 301-920-9990.

Sincerely,


Debbie Ryan
Principal

DR/sk

Rosemary Hills Elementary School

2111 Porter Road
Silver Spring, Maryland

Teléfono: 301-920-9990/301-650-6400

Estimados Padres/Guardianes:

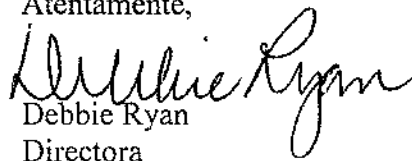
La salud y bienestar de sus hijos es de suma importancia para Montgomery County Public Schools (MCPS). El Consejo de Educación del Condado de Montgomery (Montgomery County Board of Education) adoptó la Política JDP, *Cuidados de Emergencia para Estudiantes Que Experimentan Anafilaxia (Emergency Care for Students Experiencing Anaphylaxis)*, y MCPS adoptó el Reglamento JPD-RB, *Cuidados de Emergencia para Estudiantes Que Experimentan Anafilaxia (Emergency Care for Students Experiencing Anaphylaxis)*, para proteger a sus hijos en caso de una emergencia.

Si se sabe que su hijo/a padece de una alergia anafiláctica, el *Código Comentado de Maryland (Annotated Code of Maryland)*, Artículo de Educación, Sección 7-426, afirma que los padres/guardianes son responsables de notificar a las escuelas acerca de las necesidades especiales de cuidados de la salud o diagnóstico de un niño y de proveer los medicamentos adecuados. Estos medicamentos pueden ser guardados en la enfermería de la escuela para el uso de su hijo/a en caso de emergencia. Para hacer esto, usted necesita completar el formulario MCPS Form 525-14, *Cuidados de Emergencia para el Manejo de un Estudiante con Diagnóstico de Anafilaxia: Acuerdo de Liberación de Responsabilidad e Indemnización para Auto Inyector de Epinefrina (Emergency Care for the Management of a Student with a Diagnosis of Anaphylaxis: Release and Indemnification Agreement for Epinephrine Auto Injector)* y debe entregar a la escuela el auto inyector de epinefrina adecuadamente etiquetado. El formulario puede obtenerse del enfermero/a de su escuela o en la siguiente página de Internet: www.montgomeryschoolsmd.org/departments/forms/pdf/525-14.pdf.

Entendemos que los padres/guardianes o los estudiantes podrían no saber de la existencia de una alergia anafiláctica hasta que ocurra una situación de emergencia. Maryland exige que todas las escuelas capaciten a los miembros del personal para que reconozcan las señales de anafilaxia y que tengan un suministro de auto inyectores de epinefrina (es decir, EpiPen®) para uso en caso de emergencia. Miembros designados del personal en todas las escuelas están capacitados para administrar EpiPen®. Por favor, tenga la certeza de que siempre que se use un auto inyector de epinefrina, ya sea que le pertenezca a su hijo/a o que sea uno que suministre la escuela, usted y 911 recibirán una llamada.

Si usted tiene preguntas adicionales sobre esta política del Consejo de Educación del Condado de Montgomery y sobre el reglamento de MCPS, o sobre el uso de EpiPen® en las escuelas, por favor comuníquese conmigo o con el enfermero/a de la escuela, llamando al 301-920-9990.

Atentamente,


Debbie Ryan
Directora

DR/sk

REGULATION **MONTGOMERY COUNTY PUBLIC SCHOOLS**

Related Entries: ECJ-RA, JPC-RA, JPD, JPD-RA, JPF-RA
Responsible Office: Special Education and Student Services
Related Source: *Annotated Code of Maryland*, Education Article, §7-426 (ED §7-426) et seq;
Code of Maryland Regulations 13A.05.05.05-.15

Emergency Care for Students Experiencing Anaphylaxis

I. PURPOSE

To establish procedures to provide emergency medical care to any student experiencing an anaphylactic reaction, through the collaborative efforts of parents/guardians, students, Montgomery County Public Schools (MCPS), and the Montgomery County Department of Health and Human Services School Health Services (SHS)

II. BACKGROUND

Some students have severe, life-threatening reactions to insect venom, foods, or other substances in the environment and rapidly develop a condition called anaphylaxis. These students will need an immediate injection of epinephrine while awaiting emergency services.

Maryland law directs each local school district to authorize the school nurse and other trained personnel to administer auto-injectable epinephrine to any student who is determined to be or perceived to be in anaphylaxis. Districts are required to provide training for school personnel on how to recognize the symptoms of anaphylaxis, develop procedures for the emergency administration of auto-injectable epinephrine, develop proper follow-up emergency procedures, and authorize a school nurse to obtain and store at a public school auto-injectable epinephrine to be used in an emergency situation.

III. DEFINITIONS

- A. *Anaphylaxis* means a sudden, severe, and potentially life-threatening allergic reaction that occurs when an individual is exposed to an allergen.
- B. *Auto-injectable epinephrine* means a portable, disposable drug delivery device that contains a premeasured single dose of epinephrine that is used to treat anaphylaxis in an emergency situation.

IV. PROCEDURES

A. Training

School personnel are trained to be prepared for students who may experience anaphylaxis, whether or not the student has been previously identified as having an anaphylactic allergy or has a prescription for epinephrine from an authorized licensed health care practitioner.

1. The Office of Special Education and Student Services (OSESS) is responsible for developing general awareness training materials and recordkeeping procedures. All school-based employees, bus operators, and bus attendants receive general awareness training to recognize the symptoms of anaphylaxis.
2. The principal, in consultation with the School Community Health Nurse (SCHN), is responsible for identifying school-based employees who volunteer to receive training both to recognize signs and symptoms of anaphylaxis and, in addition, training on how to administer auto-injectable epinephrine.
 - a. Selected employees should include the principal or another administrator, and at least two additional school-based employees.
 - b. Principals, when possible, should consider selecting employees trained in first aid and cardiopulmonary resuscitation.
 - c. Employee agreement to be trained to administer epinephrine is voluntary.
 - d. MCPS and SHS will collaborate to provide and monitor training on recognition of the symptoms of anaphylaxis and on administration of auto-injectable epinephrine.
3. Appropriate staff members will receive training on the Individual Health Care Plans for students with known anaphylaxis. Individual Health Care Plans for students with known anaphylaxis are detailed further in Section IV.B.

B. Documentation, Medication, and Delivery Devices Required for Students with Known Anaphylactic Allergies

1. The SCHN, in collaboration with MCPS, identifies students with known anaphylactic reactions to certain insect venom, foods, or other substances through school conferences, a review of health records, reports from a parent/guardian, physician, or self-referral.
2. The parent/guardian of a student with special health needs is responsible under Maryland law ED §7-426(b)(2) for the following:
 - a. Notifying the school of the student's special health care needs or diagnosis
 - b. Providing appropriate medication and delivery devices
 - c. Providing consent for the administration of medication
3. When a student with a known anaphylactic reaction is identified, the SCHN and, as needed, the principal or designee, works with the student's parents/guardians on an annual basis to prepare for medical emergencies that the student may encounter during the school day by:
 - a. Obtaining a current doctor's order, MCPS Form 525-14: *Emergency Care for the Management of a Student With a Diagnosis of Anaphylaxis*, that is signed by the health provider and the parent/guardian and updated annually
 - b. Establishing an Individual Health Care Plan, outlining the conditions under which the medication is administered and communicating the plan to appropriate staff, including bus operators and attendants
 - c. Obtaining appropriate medication and delivery devices from the parent/guardian to include:
 - i. Parent/guardian providing two doses of epinephrine when there is an order for a repeat dose
 - ii. Parent/guardian replacing the epinephrine when notified by health room staff that the medication has been used or when the expiration date has passed
 - iii. Parent/guardian taking the student's unused epinephrine from the health room at the end of the school year

- d. Completing and filing MCPS Form 525-14: *Emergency Care for the Management of a Student With a Diagnosis of Anaphylaxis*, in the Medication Administration Record folder or notebook
4. The SCHN is responsible for maintaining a list in the health room using MCDHHS 3190, *Students with Identified Anaphylaxis/Severe Allergic Reactions Information*, of students with known anaphylaxis, including the signs and symptoms of a severe allergic/anaphylactic reaction, and the names of school staff trained in use of auto-injectable epinephrine. The SCHN is responsible for distributing a copy of this list to the principal and appropriate staff members. A copy also is to be stored in the school emergency kit.
- C. Acquisition, Storage, and Replacement of Auto-Injectable Epinephrine
1. The Montgomery County Department of Health and Human Services is responsible for designating an individual to prescribe epinephrine for use in MCPS.
 2. OSESS and SHS will collaborate to develop procedures that address acquisition, storage, and replacement of epinephrine.
- D. Emergency Administration and Follow-up
1. Epinephrine will be administered by SHS personnel if they are present in the school. In the absence of SHS personnel, auto-injectable epinephrine is to be given by selected school-based employees who have received training.
 2. In all cases, when epinephrine is administered, 911 and the parent/guardian must be called.
 3. After a student has been administered epinephrine at school, the SCHN and, as needed, the principal/designee, will collaborate to follow up with parents/guardians, providing outreach and education, as appropriate, regarding emergency medical care procedures for students with special health needs.
- E. Students Authorized to Self-Administer Auto-Injectable Epinephrine
- Responsible and developmentally capable students may self-administer their auto-injectable epinephrine if recommended by their health care provider and approved by the SCHN.

1. MCPS Form 525-14: *Emergency Care for the Management of a Student With a Diagnosis of Anaphylaxis*, must be completed and signed by the health care provider, indicating that the student may carry and self-administer auto-injectable epinephrine.
2. The SCHN must evaluate and approve the student's ability to self-administer the medication.
3. The student must be instructed by parents/guardians, appropriate school staff, and the SCHN to notify health room or school staff when he/she has self-administered auto-injectable epinephrine, so that 911 can be called, as well as the parent/guardian.

F. Reporting Requirements

All uses of epinephrine (MCPS/SCHN-provided or student-provided) must be reported as follows:

1. The principal, or designee, follows procedures for reporting a serious incident, as described in MCPS Regulation COB-RA, *Reporting a Serious Incident*.
2. The principal, or designee, working with the SCHN, collects information required by the Maryland State Department of Education (MSDE) whenever epinephrine is administered to a student or staff member, as follows:
 - a. The SCHN reports the required information in the SHS *Anaphylaxis/Epinephrine Administration Reporting System (AiRS)* and prints a copy for the principal's signature.
 - b. The principal or designee distributes copies of the signed report as follows:
 - i. Student health record
 - ii. Department of Student Services (DSS)
 - iii. Office of School Support and Improvement
3. DSS and SHS will collaborate to comply with reporting requirements set forth by MSDE.

G. Parental Notification

DSS will develop and implement a method for annually notifying parents/guardians of students about Board Policy JPD, *Emergency Care for Students Experiencing Anaphylaxis* and this regulation.

Regulation History: Formerly Regulation No. 525-14, revised October 1982; revised April 1, 2008; revised June 20, 2013.