Campus:	lame:	LISD Allergy			-	Place Student's
Bevere Allergy to:			Grade:	Teacher		
Does Student Have Asthma?YesNo Image: State in the						Here
Does Student Have Asthma?YesNo Image: State of the	Student hi	story and warning signs:				
Star: a tew hives, mill dramage With: indy mouth Stomach: india rouse or discomfort Nose: it dy, runny nose, sneezing TREATMENT PLAN india rouse or discomfort (Two CHOICES - PLEASE CHECK ONLY ONE): Image: store threathy note swattowing Image: store threathy note public, discovery swattowing Image: store threathy note swattowing Image: store threathy note public, discovery swattowing Image: store threathy note swattowing Image: store threathy note public, discovery swattowing Image: store threathy note swattowing Image: store threathy note public, discovery swattowing Image: store threathy note swattowing Image: store threathy note store threathy note public, discovery swattowing Image: store threathy note threathy note store threathy note store threathy note s	oes Stud	lent Have Asthma?YesN	No			
Skin: a few rives, mid inclung initial interment initial interment Nese: interly, nonvoint Interpretation interpretation Nese: interly, nonvoint Interpretation interpretation Interpretation intention						
Mouth: it dry mouth it dry, mouth it dry, mouth, stomach, or it dry, mouth it dry, mouth it dry,					SEVERE SYMPTOMS	
Stomach: Initianuses or discontration Nose: It dry, runny nose, sneezing TREATMENT PLAN (Two CHOICES - PLEASE CHECK ONLY ONE): Image: Image: Image: <td< td=""><td></td><td></td><td></td><td></td><td></td><td>s</td></td<>						s
Nose: Itthy, rumy nose, sneezing TREATMENT PLAN (TWO CHOICES - PLEASE CHECK ONLY ONE): Image: Stromach: sovere camping Image: Delta 1: For MILD SYMPTOMS: Image: Delta 1: For MILD SYMPTOMS: Image: Delta 1: For MILD SYMPTOMS: Mild symptoms from MORE THAN <u>ONE</u> BODY AREA (skin, mouth, stomach, or nose) are TREATED AS SEVERE SYMPTOMS: Student may soft-carry & administer medications an been instructed on proper use Mild Symptoms from a single body area: 1. Give Antihistamine if ordered. 1. Give Antihistamine if ordered. 2. Stay with student and monitor for worsening symptoms. 3. If symptoms progress. USE EPINEPHRINE (treat as SEVERE symptoms). Image: Delta 1: 1. ADMINISTER EPHINEPHRINE immeDiateLY. Call 911. 2. Grate ta parent. For SEVERE SYMPTOMS: 1. Additistamine and then Inhaler if ordered (and not already used). EPINEPHRINE Dose: 1. addition is kept: mg = 1. ADMINISTER EPHINEPHRINE IMMEDIATELY. Call 911. 2. Contact parent. OR Plan 2: Give Epinephrine immediately for ANY symptoms if the allergen was likely eaten : 1 1. ADMINISTER EPHINEPHRINE IMMEDIATELY. Call 911. 2. Grid 911. Grave anthibiatamine and then Inhaler if ordered.						
Image:				. .		
TREATMENT PLAN Image: container, container		Nose: Itchy, runny hose, sneezing				
Others: anxiety, feeling bad, or feeling of impending doom Image: Structure of the structure of				5		
Plan 1: For MILD SYMPTOMS: Mild symptoms from MORE THAN ONE BODY AREA (skin, mouth, stomach, or nose) are TREATED AS SEVERE SYMPTOMS!! Give EPINEPHRINE. Mild Symptoms from a single body area: 1. Give Antihistamine if ordered. 2. Stay with student and monitor for worsening symptoms. 3. If symptoms progress, USE EPINEPHRINE (treat as SEVERE symptoms). 4. Contact parent. For SEVERE SYMPTOMS: 1. ADMINISTER EPHINEPHRINE IMMEDIATELY. 2. Call 911. 3. Give Antihistamine and then Inhaler if ordered (and not already used). 4. Lay the person flat, raise legs and keep warm. If breathing is difficult or they are vomiting, let them sit up or lie on their side. 5. If symptoms do not improve, or return, more epinephrine may be needed. See order if you need to repeat the dose and when dose is to be repeated. 6. Contact parent. Plan 2: Give Epinephrine immediately for ANY symptoms if the allergen was likely eaten : 1. ADMINISTER EPHINEPHRINE IMMEDIATELY. 2. Call 911. 3. Give Antihistamine and then Inhaler if ordered. 4. Lay the person flat, raise legs and keep warm. If breathing is difficult or they are vomiting, let them sit up or lie on their side. 5. If symptoms do not improve, or return, more epinephrine may be needed. See order if you need to repeat the dose and when dose is to be repeated. 6. Contact parent.	IREATME					
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Medication is kept:with studentin clinicbo						

I request and authorize Lewisville ISD personnel to administer the above medication as prescribed. I understand that the school administrator may designate any qualified person or persons to administer these medications. This form is valid for one school year. Physician must be licensed to practice in Texas. Temporary (2 months) orders for out of state US Physicians are acceptable to initiate treatment for transferring students. A signature is required to authorize the registered nurse and the prescribing physician to discuss and/or clarify the medication order and the student's response to the treatment plan. Elementary students are not permitted to transport medications. Unused medications not picked up at the end of the school year will be disposed of properly.

	Physician Signature: Printed Name:				Parent Signature:	
	Date: Address:	Office #:	Fax #:		Date:	
Re		Epinephrine Expires:	Lot #: A	Antihistamine Expires:	Inhaler Expires:	