



## **Protecting Students From Life-Threatening Allergic Reactions**

### **Fatal Allergies Among Children Increasing**

One in 13 children suffers from some type of food allergy, and the number is on the rise.<sup>i</sup> Of those affected, nearly 40% suffer from allergies that are severe and life threatening.<sup>ii</sup> High school aged children, ages 14-17 years old, are most likely to have a severe food allergy.<sup>iii</sup> Food allergies are the leading cause of anaphylaxis, a severe allergic reaction that can result in death, and account for over 300,000 hospital visits by children every year.<sup>iv</sup>

### **25% OF FIRST-TIME ANAPHYLACTIC REACTIONS AMONG CHILDREN OCCUR IN SCHOOL.<sup>v</sup>**

#### **Access to Epinephrine in Schools**

Public Act 97-0361 allows schools to voluntarily maintain a supply of emergency epinephrine auto-injectors (EpiPens) for students who have forgotten their EpiPen at home or who do not have a known allergy. A school nurse may administer an EpiPen to *any* student that he or she, in good faith, professionally believes is having an anaphylactic reaction and who does not have an Emergency Action Plan in place.

It is crucial that children with life-threatening allergies have immediate access to emergency epinephrine when anaphylaxis occurs. Epinephrine can save a child's life by opening his or her airways until emergency personnel arrive. Common side effects of using an EpiPen include increased heart rate, sweating, nausea, dizziness, headaches, nervousness, and anxiety.<sup>vi</sup> However, these side effects pale in comparison to the potentially life-saving benefits of epinephrine in counteracting anaphylaxis until emergency medical help arrives.

Schools are not required to maintain extra EpiPens; however, without this emergency supply, dialing 911 is the only option school personnel have if a student forgets their EpiPen and has an anaphylactic reaction or has a first-time reaction. Any delay in administering epinephrine can be fatal.

#### ***SCHOOL ACCESS TO EMERGENCY EPINEPHRINE***

##### **PROTECTING THE HEALTH OF CHILDREN WITH LIFE-THREATENING ALLERGIES**

The supply of emergency epinephrine allowed under this Act is not intended to replace epinephrine prescribed to students with known allergies. **Please encourage and remind parents whose children have known severe allergies to work with the school to put in place**

**an Emergency Action Plan, an Individual Health Care Plan, or a Section 504 Plan.** Examples of these plans are available on the Illinois School Board of Education's Web site at [http://www.isbe.state.il.us/nutrition/pdf/food\\_allergy\\_guidelines.pdf](http://www.isbe.state.il.us/nutrition/pdf/food_allergy_guidelines.pdf). It is important that schools continue to implement the *Guidelines for Managing Life-Threatening Food Allergies in Illinois Schools* to ensure that the needs of students with known allergies are accommodated throughout the school. A simple reminder to parents can save a child's life.

### **Exemption From Liability**

Under Public Act 97-0361, a school district or non-public school and its employees and agents are to incur ***no liability*** for the administration of an EpiPen, provided the school nurse acted in good faith when administering the EpiPen to a student who he or she professionally believed to be having an anaphylactic reaction. Only in cases of willful and wanton conduct will liability be incurred.

Therefore, if a student is injured or harmed due to the administration of epinephrine that a school obtained under the provisions of this Act, the school, its employees, and its agents will not be held responsible for the injury unless the epinephrine was administered with a conscious disregard for safety.

Questions regarding food allergies and anaphylaxis?

Contact the Food Allergy Initiative at [info@faiusa.org](mailto:info@faiusa.org) or 855-324-9604.

Questions regarding P.A. 97-0361?

Contact Jessica O'Leary at the Illinois Attorney General's Office  
at 312-814-1003 or [joleary@atg.state.il.us](mailto:joleary@atg.state.il.us).

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<sup>i</sup> Gupta et al., "The Prevalence, Severity and Distribution of Food Allergy in the United States," *Pediatrics*, June 20, 2011.

<sup>ii</sup> *Id.*

<sup>iii</sup> *Id.*

<sup>iv</sup> *Anaphylaxis*, The Food Allergy & Anaphylaxis Network, <http://www.foodallergy.org/section/a>.

<sup>v</sup> Sicherer et al., "Clinical Report - Management of Food Allergy in the School Setting," *Pediatrics*, Vol. 126, No. 6, December 1, 2010, p. 1232 -1239.

<sup>vi</sup> Dey Pharma, *Most Common Side Effects*, <http://www.epipen.com/about-epipen/most-common-side-effects>.