



Scout's Name _____

Allergic to _____

Troop _____	Site _____	Dates _____
_____	_____	Yes No
Age _____	Weight _____	Asthmatic _____

Scout can carry Epi-Pen with him: Yes ___ No ___

Scout can self administer Epi-Pen: Yes ___ No ___

Parent's Name _____

Parent's Emergency Phone _____

Parent Signature _____

Medications/Doses/Expirations

Epi-Pen:

Antihistamine (brand and dose):

Extremely reactive to the following foods _____

[] If checked, give Epi-Pen immediately for ANY symptoms if the allergy was likely eaten.

[] If checked, give Epi-Pen immediately if the allergy was definitely eaten, even if no symptoms are noted.

What our camps will do:

Before Camp:

- Meet with parents and Scouts to discuss menu options, storage and handling of food, etc.
- Maintain a book of all ingredients
- Upon request, fax menu to parent/Scout

At Camp:

- Write allergens on the white board/menu board for each meal
- Store "Scout brought" food in a separate location
- Separately prepare and serve food for Scouts with a food allergy
- If needed, allow Scout to eat in an alternate location (ie: food services manager's office, outside dining hall, etc.)

Questions?

Contact:

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Food Allergies/Sensitivities



A guide outlining policies and guidelines regarding food allergies and sensitivities in our Patriots' Path Council summer camp operations.

A guide for parents and Scouts in the Patriots' Path Council.





Family Responsibility

Before Camp:

- Become familiar with the camp's food allergy plan.
- Meet with the food service staff
- Identify a responsible adult or leader who is knowledgeable of campers needs

At Check-in:

- Notify the camp of your Scout's allergies
- Complete the form (attached) and present to the health officer with the medication (for review)
- Meet with the health officer
 - Discuss what happens if an exposure occurs, and time to onset of symptoms
 - Ensure the form is complete, with contact information
 - Ensure medication has not expired/gone bad
 - Review proper use of Epi-Pen

Camper Responsibility

Before Camp:

- Become familiar with the camp's food allergy plan
- Become familiar with what food the camp serves, and what alternatives are available.

At Camp:

- NEVER trade food with other campers
- Do NOT eat anything with unknown ingredients
- Read ALL labels and check with an adult if it is appropriate to eat
- Alert an adult/staff/health officer of ANY reaction, no matter how mild
- Do NOT go off alone, especially if symptoms are beginning
- Know alternate locations where it is safe to eat
- Have awareness of potential allergen sources (kitchen, dining hall, trading post, etc.)



Camp Responsibility

Before Camp:

- Make available storage areas for food brought in by Scout/parents
- Ensure all staff know how to contact the health officer/EMT
- Be aware of emergency procedures for medical emergencies, including allergies
- Be aware of the signs/symptoms of an allergic reaction, both mild and severe
- Assure that the health officer has the proper training including Epi-Pen administration

At Camp:

- Ensure that Scouts with food allergies are safely included in camp activities (cooking and food related activities)
- Be certain that all staff (especially food services staff) are aware of the campers with food allergies
- Notify the health officer of any Scouts with signs/symptoms of food allergies, both mild and severe
- Post "Allergen Zone" signage at key locations, including dining hall and trading post.
- Ensure medical history confidentiality of ALL Scouts and leaders

POLICY/PROCEDURE

Any SEVERE SYMPTOMS:

One/more of the following:

- LUNG: Short of breath, wheeze, repetitive cough
- HEART: Pale, blue, faint, weak pulse, dizzy, confused
- THROAT: Tight, hoarse, trouble breathing/swallowing
- MOUTH: Obstructive swelling (tongue and/or lips)
- SKIN: Many hives over body

Or **combination** of symptoms from different body areas:

- SKIN: Hives, itchy rashes, swelling (e.g., eyes, lips)
- GUT: Vomiting, diarrhea, crampy pain



1. INJECT EPI-PEN

2. Call 911
 3. Begin monitoring
 4. Give additional meds: Antihistamine/Inhaler if asthmatic
- *Antihistamines & inhalers/bronchodilators are not to be depended upon to treat a severe reaction (anaphylaxis).
USE EPINEPHRINE.

MILD SYMPTOMS ONLY:

- MOUTH: Itchy mouth
- SKIN: A few hives around mouth/face, mild itch
- GUT: Mild nausea/discomfort



1. GIVE ANTIHISTAMINE

2. Stay with Scout; call 9-1-1 and parent
3. If symptoms progress (above), USE Epi-Pen
4. Begin monitoring

Monitoring

Stay with Scout; call 9-1-1 and parent. Tell EMS that Epi-Pen was administered. Note time and dose. Treat Scout even if parent's cannot be reached.

EPIPEN Auto-Injector and EPIPEN Jr Auto-Injector Directions

- First, remove the EPIPEN Auto-Injector from the plastic carrying case
- Pull off the blue safety release cap
- Hold orange tip near outer thigh (always apply to thigh)
- Swing and firmly push orange tip against outer thigh. Hold on thigh for approximately 10 seconds. Remove the EPIPEN Auto-Injector and massage the area for 10 more seconds

EPIPEN 2-PAK | **EPIPEN Jr 2-PAK**
EpiPen®/Analogous 0.3/0.15mg

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Adrenaclick™ 0.3 mg and Adrenaclick™ 0.15 mg Directions

Remove GREY caps labeled "1" and "2."

Place RED rounded tip against outer thigh, press down hard until needle penetrates. Hold for 10 seconds, then remove.