St Finbar's Primary Individual Anaphylaxis Management Plan





This plan is to be completed by the principal or delegate on the basis of the information from the student's medical practitioner (ASCIA Action Plan for Anaphylaxis) provided by the parent.

It is the responsibility of the parent to provide the school with a copy of the student's ASCIA Action Plan for Anaphylaxis containing the emergency response plan (signed by the medical practitioner), an up-to-date photo of the student (to be appended to this plan) and to inform the school if the child's medical condition changes.

School	Phone
Student	
DOB	Year level
Severely allergic to	
Other health	
conditions	
Medication at school	

Emergency contact details (Parent/carer)

Name	Name	
Relationship	Relationship	
Home phone	Home phone	
Work phone	Work phone	
Mobile	Mobile	
Address	Address	

Emergency Contact Details (Alternative)

Name	Name
Relationship	Relationship
Home phone	Home phone
Work phone	Work phone
Mobile	Mobile
Address	Address
Medical practitioner name	Phone
Emergency care to be	
provided at school	
Storage location for	
autoinjector device	

Environment

To be completed by the principal or delegate. Please consider each environment/area (on or off school site) the student will be in for the year, e.g. classrooms, school yards, specialist teaching areas, excursions, camps, etc.

Name of environment/area:			
Risk Identified	Actions required to minimise the risk	Who is responsible	Completion date?
Name of environment			-
Risk Identified	Actions required to minimise the risk	Who is responsible	Completion date?
Name of environment			1
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Name of environment	'	'	-
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