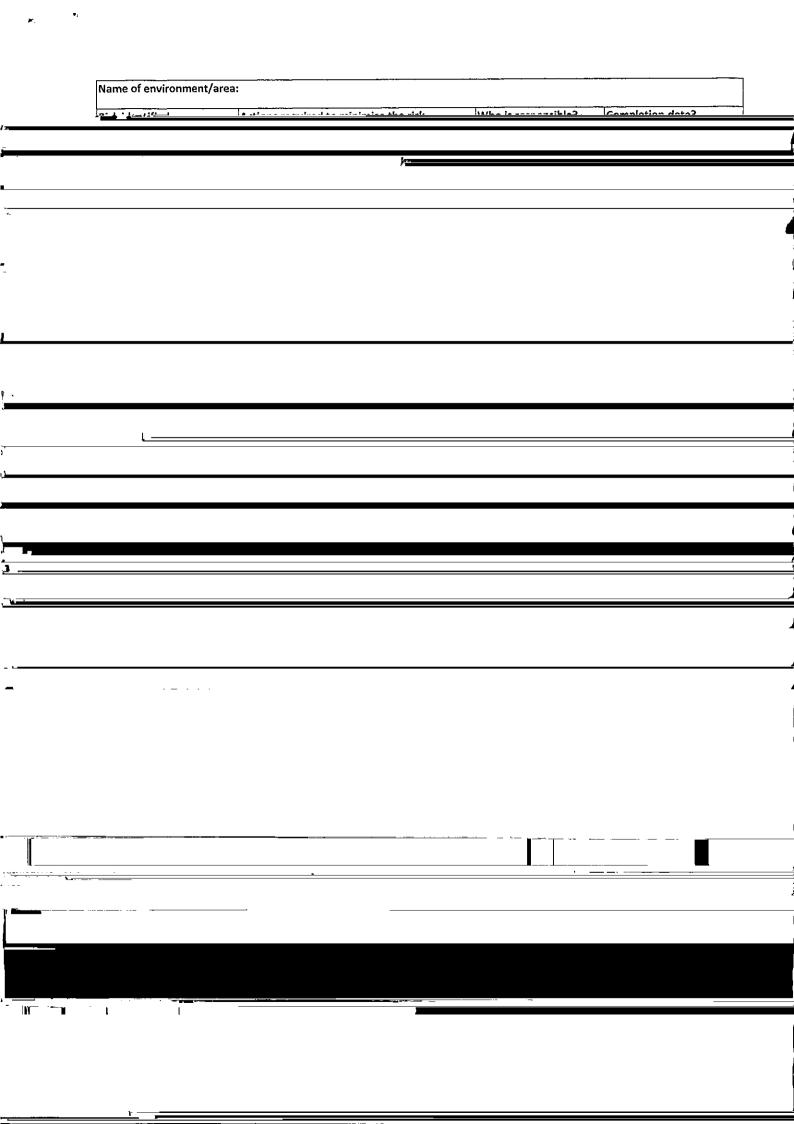


Emergency care to be		
provided at school	, ·	
		,,,,
Storage location for		:
adrenaline autoinjector		
device specific) (EpiPen® or Anapen®)		
Mapen )		
	•	
		_
	ENVIRONMENT	
To be completed by principal or nominee. Please	consider each environment/area (on and off school site) the student will be in for the year, e.g.	
classroom, canteen, food tech room, sports oval,	excursions and camps etc.	
Name of an incompant/accor		-
Name of environment/area:		
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This Individual Anaphylaxis Management Plan will be reviewed on any of the following occurrences (whichever happen earlier): annually • if the student's medical condition, insofar as it relates to allergy and the potential for anaphylactic reaction, changes ar ace an province of arthoration at udant has an anaphylactic reaction at school