CU Denver
Standard Operating Procedure

Epinephrine Auto-Injector for Severe Allergy
Additional Locations and Acquisitions

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Emergency Response
If you are experiencing or witness someone experiencing a severe allergic reaction who requires immediate medical assistance:

Call 911 and/or
Auraria Police Department 303-556-5000

Purpose
Anaphylaxis is a rare but very serious reaction that can affect several areas of the body and may threaten breathing and blood circulation. Food allergy is the most common cause of anaphylaxis, although several other allergens—insect stings, medications, or latex—are other potential triggers. Rarely, anaphylaxis is triggered by exercise. Very rarely, anaphylaxis can occur without an identifiable trigger. Although anyone who has a food allergy can experience anaphylaxis, the foods most likely to cause a severe reaction are peanuts, tree nuts, fish, and shellfish. Epinephrine (adrenaline) is a medication that can reverse the severe symptoms of anaphylaxis. It is given as a “shot” and is available as a self-injector, also known as an epinephrine auto-injector. Epinephrine is a highly effective medication, but it must be administered promptly during anaphylaxis to be most effective. Delays can result in death in as little as 30 minutes.

This standard operating procedure document is an addendum to the university's Epinephrine Auto-Injector for Severe Allergy Policy # 3063D
Scope

The content of this document is applicable to CU Denver locations and its staff, students, and faculty and work units / departments who wish to obtain a supply of epinephrine in addition to the universities required supply. This document does not cover the acquisition or use of an epinephrine auto-injector by a healthcare provider employed by or acting as an agent of the university nor does this document cover self-administration of personally prescribed epinephrine auto-injectors by any individual.

Applicable Laws

Senate Bill 23-299, C.R.S. 23-5-149 Sydney Meegan’s Law

C.R.S. 25-47-107 Good Samaritan Protections

C.R.S. 13-21-108 Persons Rendering Emergency Assistance Exempt from Civil Liability

Summary

No work unit is permitted to acquire epinephrine auto-injector(s) without approval by the process established herein. The primary supply of epinephrine auto-injectors on campus, which is required by law- will be at the Health Center at Auraria (HCA) and is available for public use. All other epinephrine auto-injector acquisitions/locations will follow this document and shall be reviewed by Public Health Response, Risk Management, and the medical staff of the Health Center at Auraria.

In general, funding for the epinephrine auto-injector program will be the responsibility of the work unit where the auto-injector is to be located. The university will accept a donation of supply of epinephrine auto-injectors that meets standards established by the federal food and drug administration, and to accept gifts, grants, and donations including in-kind donations designated for obtaining a supply of epinephrine auto-injectors.

Guidelines

1. Acquisition of Epinephrine Auto-Injectors for Work Units/Buildings/Events

   If Epinephrine auto-injectors are to be stored in emergency locations other than the primary required location in the Health Center at Auraria- planning and approval shall go
A. Criteria for the establishment of the epinephrine auto-injector program for units seeking to acquire epinephrine is established by CU Denver’s Public Health Response and includes:
   1. Operation of a business, activity, or event at which allergens capable of causing anaphylaxis may be present, including a student housing, foodservice operations, recreational and/or educational camp, outdoor recreation or athletic space, or sports arena; and
   2. Sufficient resources to ensure appropriate storage and training. Administrative units are encouraged to contact Public Health Response to obtain more specific information on epinephrine auto-injector programs applicable to their operations.

B. Maintenance and storage of epinephrine auto-injectors:
   1. Epinephrine auto-injectors will be stored in an area accessible in an emergency to facilitate the administration of the auto-injector. The area and/or storage container should be clearly marked. As timely retrieval of the device is critical, storage locations shall not be locked.
   2. The device should be regularly inspected including verification of the expiration date and ensuring the physical integrity of the device. A log of such inspections should be maintained by the work unit.

C. Epinephrine auto injectors shall be replaced when nearing the expiration dates. It is up to the work unit to track and replace when necessary. Expired devices may be placed in a proper sharps’ container for disposal. When sharps containers are full, call Environmental Health and Safety for pickup at 303-724-0111.

II. Training Recommendation
A. Training is recommended for anyone who would like to be prepared to help in an anaphylaxis emergency. Training would include the following components:
   1. How to recognize signs and symptoms of severe allergic reactions, including anaphylaxis.
   2. Standards and procedures for the storage and administration of an epinephrine auto-injector.
   3. Emergency follow-up procedures after an epinephrine auto-injector is administered, including the necessity of calling the telephone number "911" or another telephone number for an emergency medical service provider.

B. For the most up to date training course, please contact the Public Health Director; Lacey.Klindt@ucdenver.edu or visit the Public Health Response website.
III. Responsibilities for Individuals with Severe Allergies:

**Students with severe allergies should:**

- Contact the Health Center at Auraria (303-615-9999) and the Disability Resources and Services (303-315-3510) before arriving on campus, or as soon as possible, to discuss and develop a specific condition and allergen(s) plan;

- Once on campus, follow the plan and advice provided, and follow-up with The Health Center at Auraria (303-615-9999) if there are any concerns at any time and/or after a mild reaction throughout the year.

**Employees with severe allergies should:**

- Employees with severe allergies should contact their primary care physician (or the Health Center at Auraria 303-615-9999) and Human Resources (303-315-2700), to discuss and develop a reasonable accommodation plan for their specific condition and allergen(s).

**Definitions**

**Administer:**

- The direct application of an epinephrine auto-injector to the body of an individual.

**Allergy:** An allergy is a chronic medical condition involving an abnormal immune system reaction to an ordinarily harmless substance called an allergen.

- Severe Allergy and Risk of Anaphylaxis: Allergies to food, insect stings, medication and other substances can trigger a potentially life-threatening anaphylactic reaction. The most common causes are food allergens (e.g. peanuts, tree nuts, fish, shellfish (crustaceans, mollusks), egg, milk, mustard, sesame, soy, wheat) and insect stings (e.g. wasps, honeybees, hornets, yellow jackets).

**Anaphylaxis:** The most serious type of allergic reaction. Symptoms of anaphylaxis can vary for different people from one reaction to the next. Symptoms generally include two or more of the following body systems: Skin, Respiratory, Gastrointestinal and/or Cardiovascular. However, low blood pressure alone in the absence of other symptoms can also represent anaphylaxis.
• **Skin**: hives, swelling (face, lips, tongue), itching, warmth, redness;

• **Respiratory** (breathing): coughing, wheezing, shortness of breath, chest pain or tightness, throat tightness, hoarse voice, nasal congestion or hay fever-like symptoms (runny, itchy nose and watery eyes, sneezing), trouble swallowing;

• **Gastrointestinal** (stomach): nausea, pain or cramps, vomiting, diarrhea;

• **Cardiovascular** (heart): paler than normal skin color/blue color, weak pulse, passing out, dizziness or lightheadedness, shock;

• **Other**: anxiety, sense of doom (the feeling that something bad is about to happen), headache, uterine cramps, metallic taste.

Of the above anaphylaxis symptoms, trouble breathing and a drop in blood pressure are identified as the most dangerous and can lead to death if not immediately treated/if treatment is delayed.

**Auto-Injector**: A device used for injecting a single dose (measured amount) of a drug into your own or another person’s body.

**Epinephrine**: The drug used to treat anaphylaxis. It is commonly delivered using an auto-injector.

• **Stock Epinephrine**: Term used to describe the availability of undesignated epinephrine auto-injectors.

**References**

Health Center at Auraria website: [https://healthcenter1.com](https://healthcenter1.com)

CU Denver Public Health Response website: [https://ucdenver.edu/public-health-response](https://ucdenver.edu/public-health-response)


CU Denver Disability Services website: [https://www.ucdenver.edu/offices/disability-resources-and-services](https://www.ucdenver.edu/offices/disability-resources-and-services)

CU Denver Human Resources ADA website: [https://www.ucdenver.edu/offices/human-resources/employee-relations-performance/ada-compliance](https://www.ucdenver.edu/offices/human-resources/employee-relations-performance/ada-compliance)

Senate Bill 23-299, C.R.S. 23-5-149 **Sydney Meegan’s Law**
CU Systems Risk Management: https://www.cu.edu/risk/