

Advice to a school principal: child with peanut anaphylaxis and asthma



Assume that today's date is 21 October 2026. You are a GP. Oscar's parents have asked you to write to his school. Using the information in the case notes, write a letter to the school principal, Mr David Rowe, advising on how the school should manage Oscar's allergy and asthma. Address the letter to Mr David Rowe, Principal, Greenhill Primary School, 45 School Lane, Greenhill. In your answer: expand the relevant notes into complete sentences; do not use note form; use letter format. The body of the letter should be approximately 180–200 words.

Choose one box per line: I = Include / C = Compress / O = Omit. Answers and reasons are on the webpage (scan QR).

	I	C	O		I	C	O
Patient details				Specialist review (14/10/26 — paediatric allergist)			
1. Name: Oscar Nguyen	☐	☐	☐	17. Prescribed adrenaline (epinephrine) autoinjector 0.3 mg × 2 (one for school, one with family)	☐	☐	☐
2. DOB: 11/05/2019 (7 yrs); Year 2	☐	☐	☐	18. Anaphylaxis action plan completed by allergist (copy attached)	☐	☐	☐
3. Weight: 24 kg	☐	☐	☐	19. Asthma increases risk of severe reaction — must be well controlled	☐	☐	☐
Social background				GP consultation today			
4. Lives with mother (weekdays) and father (alternate weekends) — both parents have consented to sharing this information with the school	☐	☐	☐	20. Asthma currently well controlled	☐	☐	☐
5. Older sister (10) attends same school	☐	☐	☐	21. Mother trained in autoinjector use	☐	☐	☐
6. Plays junior football Saturday mornings	☐	☐	☐	22. Mother asked about oral immunotherapy — allergist to discuss at review in 6/12	☐	☐	☐
7. Father reports Oscar's previous school 'handled things badly'; asked for that school to be criticised in the letter	☐	☐	☐				
Medical history				Advice for school			
8. Born at 36 weeks; no neonatal complications	☐	☐	☐	23. Autoinjector + action plan to be kept together, unlocked, easily accessible, not refrigerated; to go with Oscar on excursions and sports days	☐	☐	☐
9. Eczema as an infant — resolved	☐	☐	☐	24. All staff who supervise Oscar to be trained in recognising anaphylaxis and using autoinjector	☐	☐	☐
10. Grommets inserted age 3	☐	☐	☐	25. Severe reaction (difficulty breathing, wheeze, hoarse voice, persistent cough, pale/floppy): lay flat — if breathing difficult, sit with legs outstretched; do not stand or walk; give adrenaline immediately, call ambulance, then phone parents	☐	☐	☐
11. Mild asthma since age 5 — salbutamol inhaler via spacer PRN (approx. 1x/month)	☐	☐	☐	26. If no response after 5 min, give further adrenaline if another device available; if in doubt, give adrenaline; if wheeze and unsure whether asthma or anaphylaxis → give adrenaline first, then asthma reliever	☐	☐	☐
12. No other medications	☐	☐	☐	27. Avoid peanut-containing foods in classroom activities; no food sharing; inform canteen	☐	☐	☐
Recent event (30/09/26)				28. Salbutamol inhaler, spacer and written asthma action plan to be available at school	☐	☐	☐
13. At a birthday party, ate satay chicken → within 10 min: lip swelling, hives, vomiting, wheeze, hoarse voice	☐	☐	☐				
14. Ambulance called; IM adrenaline given by paramedics; observed in ED overnight; full recovery	☐	☐	☐				
Specialist review (14/10/26 — paediatric allergist)							
15. Diagnosis: peanut allergy with anaphylaxis (skin prick test 12 mm)	☐	☐	☐				
16. Tree nuts tolerated at home (cashew, almond)	☐	☐	☐				