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ACTION PLAN FOR Anaphylaxis (Insect allergy)

for use with EpiPen® or EpiPen® Jr adrenaline autoinjectors

Name: _____

Date of birth: _____

Photo

Insect allergies: _____

Other allergies: _____

Family/carer name(s): _____

Work Ph: _____

Home Ph: _____

Mobile Ph: _____

Plan prepared by:

Dr _____

Signed _____

Date _____

MILD TO MODERATE ALLERGIC REACTION

- swelling of lips, face, eyes
- hives or welts

ACTION

- **if sting can be seen, flick it out immediately (but do not remove ticks)**
- stay with person and call for help
- give medications (if prescribed) .....
- locate EpiPen® or EpiPen® Jr
- contact family/carer

Watch for any one of the following signs of Anaphylaxis

ANAPHYLAXIS (SEVERE ALLERGIC REACTION)

- abdominal pain, vomiting
- difficult/noisy breathing
- swelling of tongue
- swelling/tightness in throat
- difficulty talking and/or hoarse voice
- wheeze or persistent cough
- loss of consciousness and/or collapse
- pale and floppy (young children)

ACTION

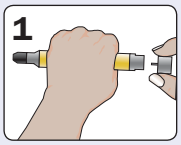
1. **Give EpiPen® or EpiPen® Jr**
2. **Call ambulance*- telephone 000 (Aus) or 111 (NZ)**
3. **Lay person flat and elevate legs. If breathing is difficult, allow to sit but do not stand**
4. **Contact family/carer**
5. **Further adrenaline doses may be given if no response after 5 minutes (if another adrenaline autoinjector is available)**

If in doubt, give EpiPen® or EpiPen® Jr

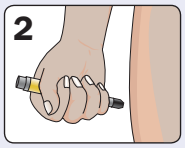
EpiPen® Jr is generally prescribed for children aged 1-5 years.
*Medical observation in hospital for at least 4 hours is recommended after anaphylaxis.

Additional information _____

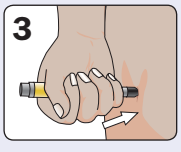
How to give EpiPen® or EpiPen® Jr



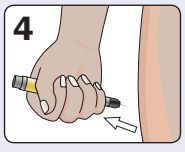
Form fist around EpiPen® and PULL OFF GREY SAFETY CAP.



PLACE BLACK END against outer mid-thigh (with or without clothing).



PUSH DOWN HARD until a click is heard or felt and hold in place for 10 seconds.



REMOVE EpiPen® and DO NOT touch needle. Massage injection site for 10 seconds.

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