Difficult/noisy breathing
Swelling of tongue
Swelling/tightness in throat
Difficulty talking and/or hoarse voice
Wheeze or persistent cough
Persistent dizziness or collapse
Pale and floppy (young children)

Anaphylaxis

ACTION PLAN FOR Anaphylaxis

For use with Anapen® adrenaline autoinjectors

How to give Anapen®

1. PULL OFF BLACK NEEDLE SHIELD.

2. PULL OFF GREY SAFETY CAP from red button.

3. PLACE NEEDLE END FIRMLY against outer mid-thigh at 90° angle (with or without clothing).

4. PRESS RED BUTTON so it clicks and hold for 10 seconds. REMOVE Anapen® and DO NOT touch needle. Massage injection site for 10 seconds.

MILD TO MODERATE ALLERGIC REACTION

- Swelling of lips, face, eyes
- Hives or welts
- Tingling mouth
- Abdominal pain, vomiting (these are signs of anaphylaxis for insect allergy)

ACTION FOR MILD TO MODERATE ALLERGIC REACTION

- For insect allergy, flick out sting if visible. Do not remove ticks.
- Stay with person and call for help.
- Locate Anapen®300 or Anapen®150 adrenaline autoinjector.
- Phone family/emergency contact.

Mild to moderate allergic reactions may not always occur before anaphylaxis

Watch for ANY ONE of the following signs of anaphylaxis

ANAPHYLAXIS (SEVERE ALLERGIC REACTION)

- Difficult/noisy breathing
- Swelling of tongue
- Swelling/tightness in throat
- Difficulty talking and/or hoarse voice
- Wheeze or persistent cough
- Persistent dizziness or collapse
- Pale and floppy (young children)

ACTION FOR ANAPHYLAXIS

1. Lay person flat. Do not allow them to stand or walk. If breathing is difficult allow them to sit.
2. Give Anapen®300 or Anapen®150 adrenaline autoinjector.
3. Phone ambulance*: 000 (AU) or 111 (NZ).
4. Phone family/emergency contact.
5. Further adrenaline doses may be given if no response after 5 minutes, if another adrenaline autoinjector is available.

If in doubt, give adrenaline autoinjector
Commence CPR at any time if person is unresponsive and not breathing normally. Anapen®300 is generally prescribed for adults and children over 5 years. Anapen®150 is generally prescribed for children aged 1-5 years.

*Mental observation in hospital for at least 4 hours is recommended after anaphylaxis.

IF UNCERTAIN WHETHER IT IS ANAPHYLAXIS OR ASTHMA

- Give adrenaline autoinjector FIRST, then asthma reliever.
- If someone with known food or insect allergy suddenly develops severe asthma like symptoms, give adrenaline autoinjector FIRST, then asthma reliever.

Instructions are also on the device label and at: www.allergy.org.au/anaphylaxis

© ASCIA 2015. This plan was developed for use as a poster and to be stored with general use adrenaline autoinjectors.