

Photo

Name: _____ Date of birth: DD / MM / YYYY

Confirmed allergen(s): _____

Family/emergency contact(s):

1. _____ Mobile: _____

2. _____ Mobile: _____

Plan prepared by: _____ (prescriber) who authorises medications to be given, as consented by the parent/guardian, according to this plan.

Signed: _____ Date: DD / MM / YYYY

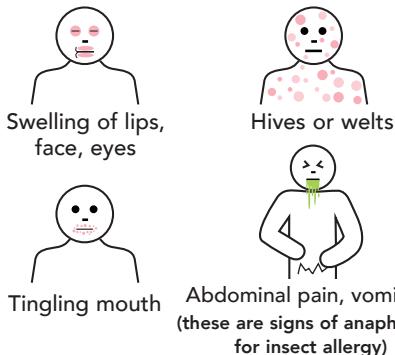
Adrenaline device/s prescribed: _____

Antihistamine: _____ Dose: _____

This plan does not expire but review is recommended by: DD / MM / YYYY

MILD TO MODERATE ALLERGIC REACTIONS

SIGNS



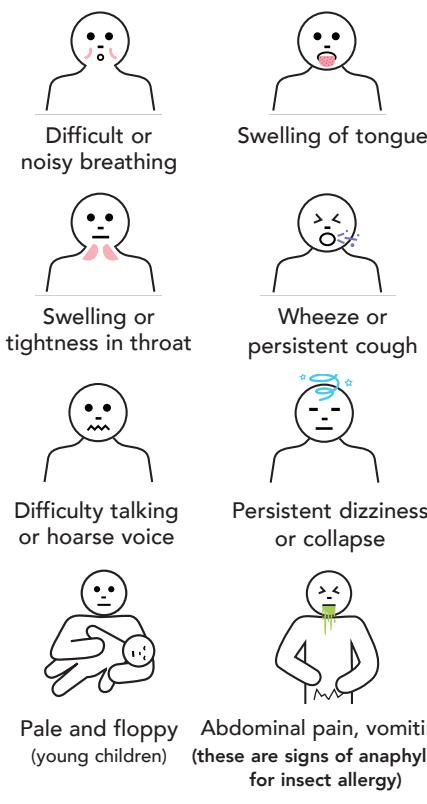
ACTIONS

- Stay with person, call for help
- Locate adrenaline (epinephrine) device
- Give antihistamine - see above
- Phone family/emergency contact
- Insect allergy - flick out sting if visible
- Tick allergy - seek medical help or freeze tick and let it drop off

Mild to moderate allergic reactions may not always occur before anaphylaxis

ANAPHYLAXIS (SEVERE ALLERGIC REACTIONS)

WATCH FOR ANY ONE OF THE FOLLOWING SIGNS



ACTIONS

1 LAY PERSON FLAT - do NOT allow them to stand or walk

- If unconscious or pregnant, place in recovery position - on left side if pregnant
- If breathing is difficult allow them to sit with legs outstretched
- Hold young children flat, not upright



2 GIVE ADRENALINE DEVICE

- 3 Phone ambulance - 000 (AU) or 111 (NZ)
- 4 Phone family/emergency contact
- 5 Further adrenaline may be given if no response after 5 minutes
- 6 Transfer person to hospital for at least 4 hours of observation



IF IN DOUBT GIVE ADRENALINE DEVICE

Commence CPR at any time if person is unresponsive or not breathing normally

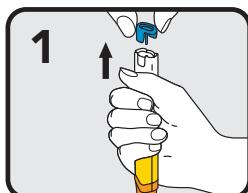


See page 2
for adrenaline
device
instructions
or
scan this code

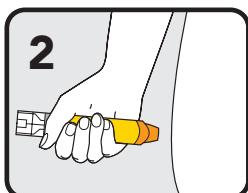
ALWAYS GIVE ADRENALINE DEVICE FIRST, then asthma reliever puffer if someone with known asthma and allergy to food, insects or medication (who may have been exposed to the allergen) has **SUDDEN BREATHING DIFFICULTY** (including wheeze, persistent cough or hoarse voice). **Anaphylaxis can occur without skin symptoms.**

If device is accidentally injected or activated, use another adrenaline device if available.
If adrenaline is accidentally injected, contact the local poisons information centre.

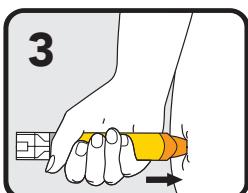
EpiPen®



Form fist around EpiPen® and pull off blue safety release



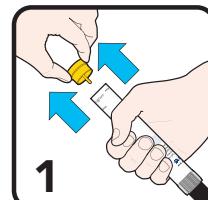
Hold leg still and place orange end against outer mid-thigh (with or without clothing)



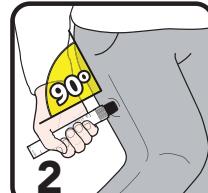
Push down hard until a click is heard or felt and hold in place for 3 seconds. Remove EpiPen®

EpiPen® Jr (150 mcg) is prescribed for children 7.5 - 20kg
EpiPen® (300 mcg) is prescribed for children over 20kg and adults

Jext®



Form fist around Jext® and pull off yellow cap



Place black injector tip against outer mid-thigh (with or without clothing)



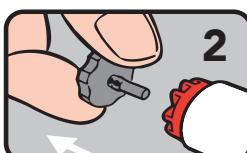
Push black tip firmly until a click is heard and hold in place for 3 seconds. Remove Jext®

Jext® Jr (150 mcg) is prescribed for children 7.5 - 20kg
Jext® (300 mcg) is prescribed for children over 20kg and adults

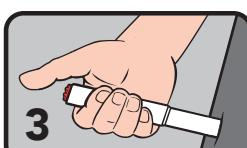
Anapen®



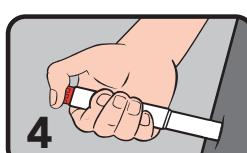
Pull off black needle shield



Pull off grey safety cap from red button



Place needle end firmly against outer mid-thigh at 90° angle (with or without clothing)



Press red button so it clicks and hold for 3 seconds. Remove Anapen®

Anapen® 500 is prescribed for children over 50kg and adults

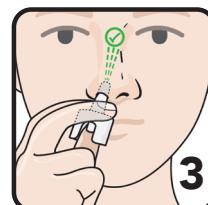
neffy®



Hold as shown.
Do not test spray



Place nozzle into nostril until fingers touch nose.



Press plunger firmly

neffy® 1mg is prescribed for children 15 - 30kg (4 years and over)
neffy® 2mg is prescribed for children and adults 30kg and over

Follow the ASCIA Action Plan or First Aid Plan for Anaphylaxis

Each device is for single-use only.

Give the used device to the ambulance with the time it was given.



Scan this QR code for instructions on the ASCIA website.