

Anaphylaxis

CHECKLIST - PATIENTS AND CARERS



This document has been developed by ASCIA, the peak professional body of clinical immunology/allergy specialists in Australia and New Zealand. ASCIA information is based on published literature and expert review, is not influenced by commercial organisations and is not intended to replace medical advice. For patient or carer support contact Allergy & Anaphylaxis Australia or Allergy New Zealand.

There are two brands of adrenaline injectors, EpiPen® and Anapen®:

- EpiPen® (300 mcg) and EpiPen® Jr (150 mcg) are available in Australia on the PBS, and New Zealand (Pharmac listed since 1 February 2023).
- Anapen® 500, Anapen® 300 and Anapen® 150 are available in Australia on the PBS.

Adrenaline injectors are prescribed as follows:

- 150 mcg devices for children weighing 7.5 to 20kg.
- 300 mcg devices for children weighing over 20kg and adults, including pregnant women.

•	500 mcg or 300 mcg devices for children weighing over 50kg and adults, including pregnant women.
1.	Prescribed adrenaline (epinephrine) injectors
	Check that the prescribed adrenaline injector dose is appropriate (see above).
	Check that the prescription is for two devices, which are rebated by the PBS in Australia and Pharmac in New Zealand. If additional adrenaline injector/s are required, these can be purchased from pharmacies, and are not rebated by PBS or Pharmac.
	Check and note expiry dates of the injector/s you purchase and consider subscribing to a reminder service
	Ensure that an ASCIA Action Plan for Anaphylaxis (RED) has been completed by your doctor or nurse practitioner (available online at www.allergy.org.au/hp/anaphylaxis/ascia-action-plan-for-anaphylaxis).
	Remember to always carry an adrenaline injector and ASCIA Action Plan.
	Store adrenaline injectors away from excessive heat or cooling. For information go to www.allergy.org.au/hp/anaphylaxis/adrenaline-autoinjector-storage-expiry-and-disposal
	Check adrenaline injector updates at www.allergy.org.au/members/adrenaline-autoinjector-availability
2.	Anaphylaxis and adrenaline injector education and training
	It is important to understand that adrenaline is the first line treatment for anaphylaxis and that antihistamines should not be used for the treatment for anaphylaxis. If antihistamines are used to treat mile to moderate allergic reactions, only non-sedating antihistamines should be used.
	Complete free ASCIA online anaphylaxis training for community at https://anaphylaxis.ascia.org.au to learn how to recognise signs and symptoms of anaphylaxis, how to give an adrenaline injector and to know that you need to phone an ambulance immediately afterwards.
	Ensure that you know how to use the adrenaline injector/s using a trainer device. Trainer devices are available from the supplier or patient support organisations.
	For further information and support consider joining a patient/carer support organisation (<u>Allergy & Anaphylaxis Australia</u> or <u>Allergy New Zealand</u>).
3.	Other issues to consider
	Check that your asthma is well managed and see your doctor or nurse practitioner if further action is required. If you are at risk of severe allergic reactions (anaphylaxis) and have asthma that is not well controlled, you are at increased risk of fatal anaphylaxis.

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For more information go to www.allergy.org.au/patients/about-allergy

instructions and general information about anaphylaxis.

To support allergy and immunology research go to www.allergyimmunology.org.au/donate

☐ Translated ASCIA anaphylaxis information includes the ASCIA First Aid Plan for Anaphylaxis, device

☐ If an adrenaline injector is left at school, children's education/care centre or office, ensure that you collect device before you leave for an extended time (such as school holidays, working or learning from home).