

ANAPHYLAXIS ACTION PLAN

PREPARED FOR:	SEVERE ALLERGIES:	NOTES:
NAME		
FIRST NAME		
SIGNED and DATED		

WHEN TO TREAT

Anaphylaxis can progress rapidly and without early warning signs.

Watch out for ANY ONE or more of these signs then ACT FAST.

A AIRWAY	B BREATHING	C CIRCULATION
Difficult to talk or swallow Tongue or throat swelling Choking sensation	Unexpected wheezing Noisy breathing Breathing difficulty	Dizziness, feeling faint Confusion, disorientation Clammy skin, collapse
Itchy rashes and skin swellings (e.g. face, lips, eyelids) do not increase the level of risk		


USE EPIPEN IMMEDIATELY, even if unsure. Adrenaline is safe for most people, even if given when not required, and can safely be injected through normal clothing.

HOW TO TREAT

Patient should stay where they are and lie horizontal – they SHOULD NOT STAND or walk.

If breathing is difficult – the patient should recline or sit with legs horizontal.

If unconscious, but breathing, they should be placed on their side (recovery position).

1 PULL OFF BLUE SAFETY CAP	2 JAB ORANGE TIP INTO OUTER THIGH & HOLD 3 SECONDS	
		
999	DIAL 999, ASK FOR AMBULANCE, AND SAY 'ANAPHYLAXIS' (<i>ana-fi-laxis</i>) Hospital assessment is strongly advised as there could be a delayed or recurrent attack.	

IMPORTANT

1. It is recommended to carry two EpiPens in case a second dose is needed.
2. If no response, GIVE SECOND DOSE (within minutes if needed) into the other thigh.
3. Antihistamine tablets do not stop anaphylaxis and are not a substitute for adrenaline.
4. SUDDEN BREATHING DIFFICULTY in an asthmatic may mean anaphylaxis. If suspected, use EpiPen, then a puff of own reliever inhaler every 30 seconds (maximum of 10).