Anaphylaxıs Emerg	gency Plan: _			(name
This person has a potentially li	fe-threatening allergy (anaphylaxis) to:		
•	(Check the appropriate boxes.)			
	☐ Food(s):			
	☐ Insect stings			
PHOTO	Other:			
	Epinephrine Auto-Injector: Expiry Date:/			
	Dosage:			
	☐ EpiPen® Jr. 0.15 mg ☐ EpiPen® 0.30 mg			
	Location of Auto-Injector(s): Previous anaphylactic reaction: Person is at greater risk. Asthmatic: Person is at greater risk. If person is having a reaction and has difficulty breathing, give epinephrine auto-injector before asthma medication.			
A person having an anaphylact	ic reaction might have I	ANY of these signs and	symptoms:	
Skin system: hives, swelling	(face lins tongue) itchi	ing warmth redness		
Respiratory system (breathir			est pain or tightness, the	roat tightness, hoarse
voice, nasal congestion or ha	y fever-like symptoms (ru	unny, itchy nose and wa	tery eyes, sneezing), tro	uble swallowing
Gastrointestinal system (stor	mach): nausea, pain or o	cramps, vomiting, diarrh	ea	
 Cardiovascular system (hear lightheadedness, shock 	t): paler than normal ski	in colour/blue colour, we	eak pulse, passing out, d	izziness or
Other: anxiety, sense of door	(the feeling that someth	ing bad is about to happ	oen), headache, uterine o	cramps, metallic taste
Early recogni	tion of symptoms and	l immediate treatmer	nt could save a persor	n's life.
Act quickly. The first signs of a	reaction can be mild, b	ut symptoms can get w	orse very quickly.	
1. Give epinephrine auto-inject instruction sheet.)	or (e.g. EpiPen®) at the f	first sign of a known or s	suspected anaphylactic re	eaction. (See attached
2. Call 9-1-1 or local emergence	y medical services. Tell t	hem someone is having	a life-threatening allergion	c reaction.
3. Give a second dose of epine		_		
Go to the nearest hospital in could worsen or come back,	even after proper treatme	ent. Stay in the hospital	for an appropriate period	
decided by the emergency de		=		
5. Call emergency contact pers	on (e.g. parent, guardia	in).		
Emergency Contact Information	1			
Name	Relationship	Home Phone	Work Phone	Cell Phone
	parent, or guardian authorize ctic reaction, as described ab			
Patient/Parent/Guardian Signature	Date	Physic	ian Signature On file	 Date













Blue to the sky. Orange to the thigh.

How to use EpiPen® and EpiPen® Jr (epinephrine) Auto-injectors.

Remove the EpiPen® Auto-Injector from the carrier tube and follow these 2 simple steps:



- Hold firmly with orange tip pointing downward.
- Remove blue safety cap by pulling straight up.
 Do not bend or twist.



- Swing and push orange tip firmly into mid-outer thigh until you hear a 'click'.
- Hold on thigh for several seconds.



Built-in needle protection

 After injection, the orange cover automatically extends to ensure the needle is never exposed.



After using EpiPen®, you must seek immediate medical attention or go to the emergency room. For the next 48 hours, you must stay close to a healthcare facility or be able to call 911.

For more information visit the consumer site EpiPen.ca.

EpiPen® and EpiPen® Jr (epinephrine) Auto-Injectors are indicated for the emergency treatment of anaphylactic reactions in patients who are determined to be at increased risk for anaphylaxis, including individuals with a history of anaphylactic reactions. Selection of the appropriate dosage strength is determined according to patient body weight.

EpiPen® and EpiPen® Jr Auto-Injectors are designed as emergency supportive therapy only. They are not a replacement for subsequent medical or hospital care. After administration, patients should seek medical attention immediately or go to the emergency room. For the next 48 hours, patients must stay within close proximity to a healthcare facility or where they can call 911. To ensure this product is right for you, always read and follow the label. Please consult the Consumer Information leaflet in your product package for complete dosage and administration instructions.





