EpiPen® Administration Procedure

Procedure and Rationale

Many individuals have allergies. Sometime these allergies can become very severe and be life threatening without intervention. When someone has a severe allergic reaction, they develop an anaphylactic response to the allergen.

Some of the most commonly documented causes of anaphylaxis are:

- Food
- Hay fever
- Medications
- Insect venom
- Latex
- Exercise
- Environmental pollutants

Symptoms of an anaphylactic reaction may include:

- Hives
- Swelling of the throat, lips, tongue or around the eyes
- Difficulty breathing or swelling
- Numbness of tingling of the lips, face, fingers
- Itching, redness to the skin
- Flushed face
- Increased heart rate
- Decreased blood pressure
- Sudden feeling of weakness
- Anxiety or sense of doom
- Collapse
- Loss of consciousness

Using an EpiPen:

1. Unscrew the yellow or green cap off the EpiPen® carrying case and remove the EpiPen® from its storage tube.
2. Grasp unit with the black tip pointing downward.
3. Form fist around the unit (black tip down).
4. With your other hand, pull off the gray safety release.
5. Hold black tip near outer thigh.
6. Swing and jab firmly into outer thigh until it clicks so that unit is perpendicular (at a 90 degree angle) to the thigh. Note: Auto-injector is designed to work through clothing.
7. Hold firmly against thigh for approximately 10 seconds. (The injection is now complete. Window an Auto-injector will now show red.)
8. Remove the unit from thigh and massage injection area for 10 seconds.
9. Call 911 and seek immediate medical attention.
10. Carefully place the used auto-injector (without bending the needle) needle first into the storage tube of the carrying case. (The case provides built-in needle protection after use.) Then screws the cap of the storage tube back on completely & take it with you to the hospital emergency room.

NOTE: Most of the liquid (about 90% stays in the auto-injector and cannot be reused.) However, the correct dose has been administered if the red flag appears in the window.

WARNING:

- NEVER put thumb, fingers or hand over the black tip. The needle comes out of the black tip. Accidental injection into hands or feet may result in loss of blood flow to these areas. If this happens, go immediately to the nearest emergency room.
- EpiPen should be injected only into outer thigh. (Stay 5 inches above knee and 5 inches below hip joint)
- Do NOT remove gray safety release until ready to use.

EpiPen® Administration (TOOL)
IMMEDIATELY AFTER USE:

- Go immediately to the nearest hospital emergency room or call 911. You may need further medical attention. Take your used auto-injector with you.
- Tell the doctor that you have received an injection of epinephrine in your thigh.
- Give your used EpiPen®/EpiPen® Jr. to the doctor for inspection and proper disposal.

Care and Storage of the EpiPen:

- Keep TWO EpiPens nearby and ready for use at all times.
- Store EpiPens® at 77 degrees F. For single outing. OK if kept between 50-85 degrees for the day only.
- Protect EpiPen®’s from light
- DO NOT store in refrigerator.
- DO NOT expose to extreme cold or heat.
- DO NOT store in vehicle glove box.
- Check expiration date of the EpiPen before using and replace when expired.
- Examine contents of clear window periodically. If solution is discolored or contains solid particles (precipitate), replace the unit. Good solution should be clear.

Additional Important Information:

When an individual has been identified by a Health Care Professional as having allergies that could become life threatening, the individual is given a prescription for an EpiPen®. Most prescriptions for EpiPen® can be filled by your local pharmacy.

An EpiPen® is a pre-measured auto-injector of medication (epinephrine) that can be administered by the individual themselves or someone else who has been instructed on its administration.

The EpiPen® is designed as emergency support therapy only and is not to replace or substitute for immediate medical or hospital care.

An individual known to be at risk often carries their own adrenaline injection kit for use in an emergency.

I received EpiPen® training on the indicated date and have had the opportunity to ask any questions.

Date________ Signature __________________________ Printed Name __________________________

The above listed individual has demonstrated proper usage and understanding, including the need for and the physical technique of, the EpiPen®.

Date________ Trainer Signature __________________________