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Adreanline Auto
Injector (AAI) –
EpiPen®

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Patient information

Adrenaline Auto Injector (AAI) – Jext®



What is Jext®?

Jext® is an automatic adrenaline injector (AAI). This is a 'pen' device that gives a dose of a medicine called adrenaline into the thigh. This is the medicine needed to treat anaphylaxis, the most severe allergic reaction.

Your doctor will have discussed the pros and cons and specific indications for your child needing the pen. **Two pens should be available at all times.** This is in case your child has an unpredictable allergic reaction.

If your child has a mild or moderate reaction then they will need to be given anti-histamine medication (Cetirizine or Chlorphenamine). If the reaction is more severe and involves their airway, breathing or circulation, or there is a risk of a more severe reaction, then the Adrenaline Pen must be given.

As part of the allergy planning, a specific **allergy plan** (to the right) will have been given to you which you should also give to your child's school.

bsaci **ALLERGY ACTION PLAN** **RCPCH** **energy sleep** **energyUK**

This child has the following allergies:

Name: _____ DOB: _____ Photo: _____

Watch for signs of ANAPHYLAXIS (life-threatening allergic reaction)
Anaphylaxis may occur without clear symptoms. ALWAYS consider anaphylaxis in someone with known food allergy who has **SUDDEN BREATHING DIFFICULTY**

AIRWAY
• Persistent cough
• Hoarse voice
• Swollen tongue

BREATHING
• Difficult or noisy breathing
• Wheeze or persistent cough

CONSCIOUSNESS
• Persistent dizziness
• Pale or floppy
• Suddenly sleepy
• Collapse/unconscious

IF ANY ONE (OR MORE) OF THESE SIGNS ABOVE ARE PRESENT:
1. Lie child flat with legs raised (if breathing is difficult, allow child to sit)
2. Use Adrenaline autoinjector **without delay** (no EpiPen®) (Dose: 0.3 mg)
3. Dial 999 for ambulance and say ANAPHYLAXIS (PANDA/PLA/AL/AT)
*** **IF IN DOUBT, GIVE ADRENALINE** ***

AFTER GIVING ADRENALINE:
1. Stay with child until ambulance arrives. **DO NOT** stand child up
2. Continue CPR if there are no signs of life
3. Please contact emergency contact
4. If no improvement after 5 minutes, give a further adrenaline dose using a second autoinjectable device if available
Note: we can only help you give adrenaline when it there is no need left in a suitable medical observation in hospital to be resuscitated after anaphylaxis

Mild/moderate reaction:
• Swollen lips, face or eyes
• Itchy/ringing mouth
• Hives or itchy skin rashes
• Abdominal pain or vomiting
• Sudden change in behaviour

Action to take:
• Stay with the child, call for help if necessary
• Give antihistamine
• Locate adrenaline autoinjector(s)
• Give antihistamine
• Please contact emergency contact

CETIRIZINE 5mg (if needed, see report sheet)

Emergency contact details:
1) Home: _____
2) Home: _____
3) Home: _____

Parental consent: I hereby authorize school staff to administer the medicines listed on this plan, including eye spray that is administered emergency first aid incidents, in accordance with Department of Health guidance on the use of medicines in schools.

How to give EpiPen®
1. PULL OFF BLUE SAFETY CAP and grasp EpiPen. Remember: Blue to sky, orange to the thigh!
2. Hold by RED and PINK ORANGE END against mid outer thigh, with thumb on top.
3. PUSH DOWN HARD until a click is heard or felt and hold in place for 3 seconds. Remove EpiPen.

Additional instructions:
If wheeze, GIVE ADRENALINE FIRST, then asthma reliever (blue puffer) via spacer.

This is a medical document that can only be completed for children with known anaphylaxis. It must not be altered without the permission of the responsible paediatrician. It is not intended to replace the clinical judgement of the responsible paediatrician. It is not intended to replace the clinical judgement of the responsible paediatrician. It is not intended to replace the clinical judgement of the responsible paediatrician.

Sign & print name: _____ Dr Ashley Rees, Consultant Paediatrician
Hospital: Watford and Hemel Hospitals Paediatric Department
Telephone: 01923 217 348 Date: 23-Sep-2019

Copy for: Parents GP Notes Comm Nurses

Generally allergy is managed by:

Avoidance	You MUST avoid any foods that you know your child is allergic to. Take care with labels and risk assess any new foods and when eating out in a restaurant or from a take-away.
Anti-histamine	Have anti-histamine available. For children over 1 year this is Cetirizine which is non-drowsy. Liquid is easier to take than tablets if a reaction involves the mouth or tongue.
Adrenaline Pen	Ensure you have your 'allergy kit' including the action plan , antihistamine and your child's TWO adrenaline pens and an inhaler and spacer if appropriate with you AT ALL TIMES .

What to do in an emergency.

1. Give Jext® immediately.
2. Call 999 and say "Anaphylaxis".
3. Lie the child flat or sit if they have any difficulty breathing.
4. Give a second pen dose after five minutes if there has been no improvement.

Your Jext pen

There are two types of Jext pen: Jext 150 for a younger child and Jext 300 for an older child. Both contain the same drug, but in different doses.

Jext 150 is **yellow**

It contains 150 micrograms.

For children weighing between 15kg and 30kg.



Jext 300 is **red**

It contains 300 micrograms.

For children weighing over 30kg.



Further information can be found on the company website: www.epipen.co.uk

Expiry alert service

Sign up for the Expiry Alert Service and receive free reminders by text or email when your EpiPen is about to expire.

<https://cloud.email.viatrixconnect.com/EpiPen-Expiry-Alert-Registration>. If you have more than one pen with the same expiry date, then you only need to sign up once. If your pens have different expiry dates, you should register each pen. Use the QR code above.



Why two pens?

A number of important medication authorities and health agencies have reviewed the evidence around using adrenaline auto-injectors to treat a severe allergic reaction. The consistent recommendation is that patients who have been prescribed an auto-injector **should carry two in-date adrenaline pens at all times**; however, normally only one auto-injector is required for self-administration during a reaction.

The reason for two pens includes the device failing in some way when used (this is extremely rare), the person using it incorrectly so the dose is wasted (this is more common and is why training is very important) or some people need an extra dose of adrenaline when they have a severe reaction (this is less common too).

The local Health Board produced guidance about the prescribing of adrenaline pens by GPs. This means that your child's school or nursery may be asked to provide an additional pen as well as the one (or two) your child carries. See the 'Spare Pens in Schools' link on the next page.

There is a free Jext app from the company who make the pens. You can download it by scanning the relevant QR codes opposite:

iPhone

Android



Scan Here

Scan Here

Further information about allergies

Allergy UK is a UK based charity dedicated to allergy	https://www.allergyuk.org/
The Anaphylaxis Campaign	https://www.anaphylaxis.org.uk/
Spare Pens in Schools	https://www.sparepensinschools.uk/

How to contact us

Children's Services - Allergy Dept
West Hertfordshire Teaching Hospitals NHS Trust
Vicarage Rd, Watford, WD18 0HD

Tel: 01923 4367246

PALS

If you need this leaflet in another **language, large print, Braille or audio version**, please call **01923 217198** or email westherts.pals@nhs.net.



Language



Large Print



Braille



Audio

Survey - Friends and Family Test

We welcome feedback about your care, this feedback is shared with all staff so that we can improve patients' experience. Click this [link](#), scan the QR code with your smartphone or type in: bit.ly/4o3QVFJ.



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