

ASCIA Action Plans - frequently asked questions (FAQ)

Q 1: How have the revised ASCIA Action Plans (2017) changed from the previous (2016) versions?

The following revised instructions for EpiPen® and EpiPen® Jr adrenaline (epinephrine) autoinjectors have been included in the 2017 versions of ASCIA Action Plans for Anaphylaxis:

- Reduced injection time from 10 to 3 seconds – this is based on research confirming efficacy and delivery of adrenaline through the 3 second delivery.
- Removal of the massage step after the injection – this has been found to reduce the risk of tissue irritation.

All EpiPen®s should now be held in place for 3 seconds, regardless of the instructions on the label. However, if they are held for 10 seconds it will not affect the way that the adrenaline works. EpiPen®s with a 10 second label can continue to be used and should not be replaced unless they have been used, are just about to expire or have expired.

To access the 3 second EpiPen® training video, updated ASCIA Action Plans for Anaphylaxis and other resources go to www.allergy.org.au/anaphylaxis

Q 2: How many types of ASCIA Action Plans are there?

There are two types of ASCIA Action Plans for Anaphylaxis (General and Personal):

- The General version (orange) does not contain any personal information and can be used as a poster.
- The Personal version (red) is for individuals who have been prescribed adrenaline autoinjectors. This plan includes personal information and an area for a photo.

There is also an ASCIA Action Plan for Allergic Reactions (green), which is for individuals with medically confirmed mild to moderate allergies, who need to avoid certain allergens, but have not been prescribed adrenaline autoinjectors. This plan includes personal information and an area for a photo.

ASCIA Action Plans for Anaphylaxis and Allergic Reactions have text fields that can be directly typed into.

To save ASCIA Action Plans that have patient details typed into the text fields you need to "save as" and save the document with a new name (e.g. including the patient name). They can then be printed directly from the ASCIA website or the file that they have been saved to. To order hard copies email info@allergy.org.au

Q 3: Can the older versions (prior to 2016) of ASCIA Action Plans still be used?

No. These previous versions of ASCIA Action Plans should no longer be used.

Q 4: Can schools or parents complete an ASCIA Action Plan for Anaphylaxis (personal) or ASCIA Action Plan for Allergic Reactions for their students or children?

No. ASCIA Action Plans have been developed as medical documents and must be completed, signed and dated by the patient's medical doctor. If copies are required the original signed copy should be photocopied or scanned.

Q 5: Is it possible to obtain an electronic copy of the ASCIA Action Plans so that the child's information can be inserted by parents or school/childcare staff?

No. ASCIA Action Plans have been developed in a PDF format to ensure the documents are concise, consistent and easily understood. They now have fields that can be directly typed into by the treating doctor, but not by parents, or school/childcare staff, as they are medical documents.

Q 6: How often does an ASCIA Action Plan need to be updated?

The current ASCIA Action Plans are the 2017 versions, so these are valid for use throughout 2018.

ASCIA Action Plans should be reviewed when patients are reassessed by their doctor, and each time they obtain a new adrenaline (epinephrine) autoinjector prescription, which is approximately every 12 to 18 months, with an updated photo if the patient is a child. If there are no changes in diagnosis or management, the medical information on the ASCIA Action Plan may not need to be updated.

The ASCIA Action Plan includes the date of next Action Plan review, which should coincide with the next scheduled appointment with a doctor to obtain a new adrenaline autoinjector prescription (approximately every 12 to 18 months).

Q 7: ASCIA Action Plans on the ASCIA website www.allergy.org.au are copyrighted. Can we still print them out and make copies?

Yes. ASCIA Action Plans can be printed off the website or photocopied without infringement of the copyright. ASCIA recommends that the Action Plans are printed in colour, if possible, as they are colour coded.

Q 8: What is the purpose of ASCIA Action Plans for Anaphylaxis?

ASCIA Action Plans for Anaphylaxis provide instructions for first aid treatment of anaphylaxis, to be delivered by people without any special medical training nor equipment, apart from access to an adrenaline autoinjector. All patients who have been prescribed an adrenaline autoinjector should also be provided with an ASCIA Action Plan for Anaphylaxis (personal).

Q 9: Is abdominal pain and/or vomiting without other symptoms a feature of anaphylaxis due to insect allergy?

Yes. The ASCIA Action Plan states that abdominal pain and/or vomiting is a symptom of a mild to moderate allergic reaction unless the individual has been stung or bitten by an insect in which case abdominal pain and/or vomiting is a symptom of anaphylaxis. Therefore, if someone experiences abdominal pain and/or vomiting to a food or medication, this is considered a mild to moderate symptom. However, if someone experiences abdominal pain and/or vomiting after being stung or bitten by an insect, this is a symptom of anaphylaxis and the adrenaline autoinjector should be administered.

It is important to watch for other signs and symptoms.

As stated on the ASCIA Action Plan, if in doubt as to whether the child or adult is experiencing anaphylaxis, give the adrenaline autoinjector and call an ambulance.

Q 10: Why does the ASCIA Action Plan for Anaphylaxis state that CPR should only be given if the person is unresponsive and not breathing normally AFTER giving adrenaline?

Adrenaline is life-saving and must be used promptly. Withholding or delaying the giving of adrenaline can result in deterioration and potentially death of the patient. This is why giving the adrenaline autoinjector is a priority on ASCIA Action Plans for Anaphylaxis, to prevent delays. If CPR is given before this step there is a possibility that adrenaline is delayed or not given. It is important to note that oxygen will usually be administered to the patient by ambulance staff.

Q 11: Who should have an ASCIA Action Plan for Allergic Reactions (green)?

The ASCIA Action Plan for Allergic Reactions has been developed for individuals (children or adults) with a confirmed food, insect or medication allergy, who have not been prescribed an adrenaline autoinjector, as they are not thought to be at risk of anaphylaxis. However, allergies to foods, insects or medications have the potential to result in severe allergic reactions (anaphylaxis) and the ASCIA Action Plan for Allergic Reactions provides guidance for carers on how to manage anaphylaxis if it occurs.

Q 12: Should an individual with allergic rhinitis (hay fever) have an ASCIA Action Plan for Allergic Reactions completed by their doctor?

No. Whilst allergic rhinitis can cause uncomfortable symptoms, these symptoms are not potentially life-threatening allergic reactions and hence an ASCIA Action Plan is not required.

However, if the allergic rhinitis affects an individual's asthma, their Asthma Action Plan should be followed.

Q 13: Is there an ASCIA Treatment Plan specifically designed for individuals with allergic rhinitis (hay fever)?

Yes. The ASCIA Treatment Plan for Allergic Rhinitis has been developed for individuals with allergy to environmental inhalant allergens such as grass pollen, dust mite, or mould, resulting in allergic rhinitis. This Treatment Plan is completed by the individual's medical practitioner and is meant for the individual or the parent and not for schools.

Most schools do not play a role in the treatment and management of allergic rhinitis. However, where medication administration is required at school, parents should liaise directly with the school.

Q 14: Can an organisation obtain an adrenaline autoinjector for general use (not prescribed for an individual) and do they require an Action Plan for Anaphylaxis?

Adrenaline autoinjectors for general use can be purchased without a prescription at full price from pharmacies. More information is available in the ASCIA document "Adrenaline Autoinjectors for General Use" which is available from the Anaphylaxis Resources section on the ASCIA website. The ASCIA Action Plan for Anaphylaxis (general) has been developed for use as a poster or as an instruction guide to include with an adrenaline autoinjector for general use.

Q 15: Where can we go to obtain further resources?

Patient information and anaphylaxis training is available from ASCIA, the peak professional body for clinical immunology and allergy in Australia and New Zealand: www.allergy.org.au/patients

Patient information and support is available from the following patient support groups for Australia and New Zealand:

- Allergy & Anaphylaxis Australia: www.allergyfacts.org.au/
- Allergy New Zealand: www.allergy.org.nz/

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ASCIA is the peak professional body of clinical immunology/allergy specialists in Australia and New Zealand

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Disclaimer

This document has been developed and peer reviewed by ASCIA members and is based on expert opinion and the available published literature at the time of review. Information contained in this document is not intended to replace medical advice and any questions regarding a medical diagnosis or treatment should be directed to a medical practitioner. Development of this document is not funded by any commercial sources and is not influenced by commercial organisations.

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