

Anaphylaxis is a life-threatening allergic reaction that affects more than one organ system.

Allergens that can set off anaphylaxis

FOOD



- Peanuts
- Tree nuts: almonds, pecans, cashews, walnuts
- Shellfish
- Cow's milk products
- Hen's eggs
- Fish
- Soy
- Wheat

VENOM



- Yellow jackets
- Wasps and hornets
- Honeybees
- Fire ants
- Spiders

LATEX



- Balloons
- Rubber gloves
- Condoms
- Elastic bands (i.e., physical therapy bands/rubber bands)
- Dental dams

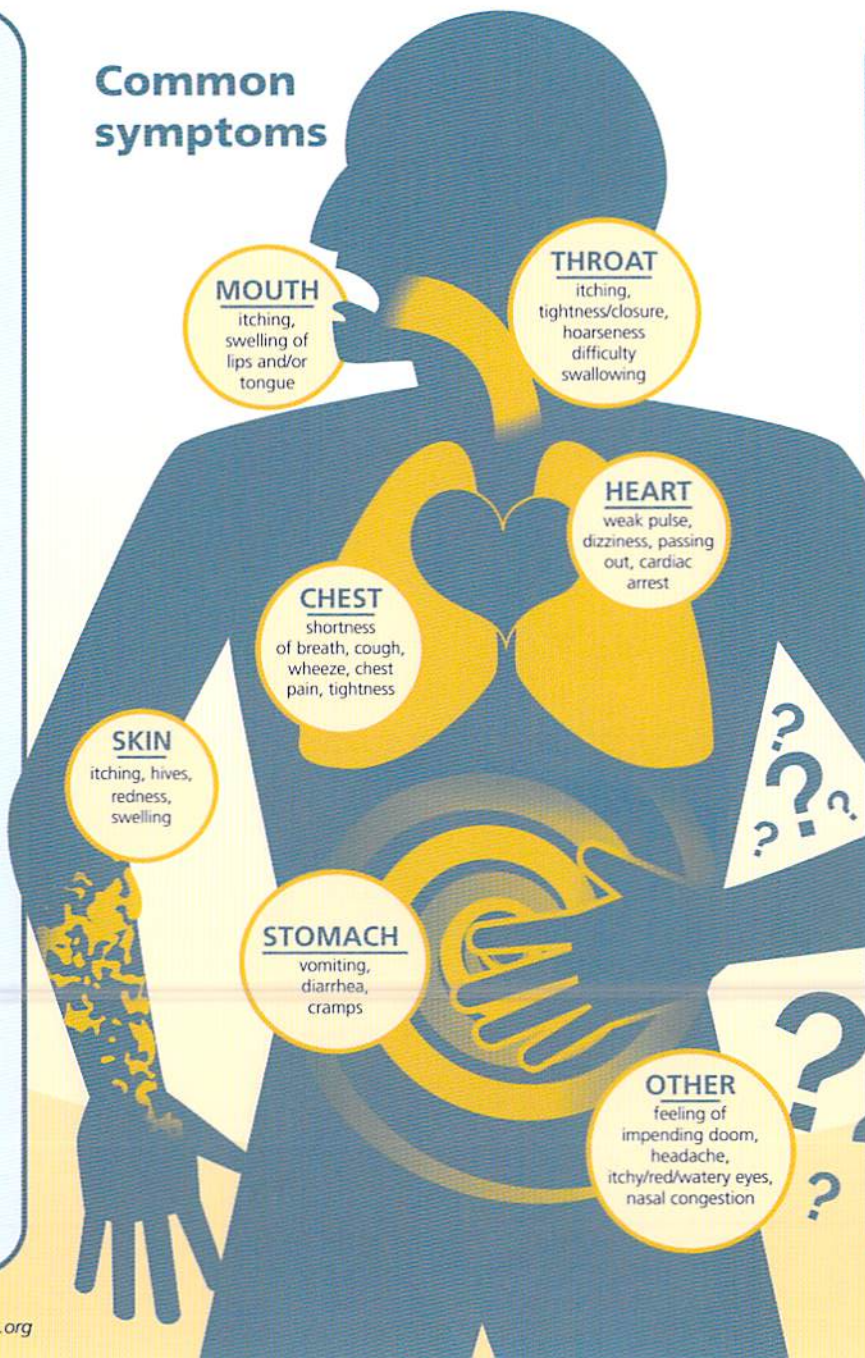
Foods with cross-reactive proteins to natural rubber: banana, avocado, chestnut and kiwi

MEDICATION



- Penicillin
- Aspirin, ibuprofen and other NSAID pain relievers

Common symptoms



MOUTH

itching, swelling of lips and/or tongue

THROAT

itching, tightness/closure, hoarseness, difficulty swallowing

HEART

weak pulse, dizziness, passing out, cardiac arrest

CHEST

shortness of breath, cough, wheeze, chest pain, tightness

SKIN

itching, hives, redness, swelling

STOMACH

vomiting, diarrhea, cramps

OTHER

feeling of impending doom, headache, itchy/red/watery eyes, nasal congestion

Epi Everywhere! Every Day! Right Away!

RECOGNIZE THE SEVERITY



Anaphylaxis is life-threatening, unpredictable, presents in multiple ways and can progress quickly

USE EPINEPHRINE IMMEDIATELY



Epinephrine is the **first line** of treatment to stop the progression of anaphylaxis. Use your epinephrine auto-injector at the **first sign of symptoms** – don't wait to see what happens!

CALL 911



Always call for emergency medical assistance and go to the emergency room for follow-up observation and treatment.

CARRY TWO AUTO-INJECTORS



Keep two epinephrine auto-injectors on hand, in case symptoms recur before emergency medical assistance is available. Up to 35% of people will require more than one dose.

FOLLOW UP



Consult a board-certified allergist for accurate diagnosis and prevention/treatment plan.