TO: Providers of Residential Services  
in Settings of 16 Persons or Fewer  
FROM: Lilia Teninty, Director  
Division of Developmental Disabilities  
DATE: December 2, 2008  
RE: EpiPens  

Allergies are common phenomena that impact millions of Americans. Allergic reactions may be caused by many factors including environmental contaminates (such as pollen, animal dander and dust mites) or by specific foods, insect bites or medications. Most people with allergies experience minimal to moderate symptoms. However, some people are highly allergic to allergens that are difficult to avoid and may be life-threatening. In such cases, individuals must be followed closely by medical professionals who are familiar with these conditions. In most cases, certain medications will be prescribed for use in the event of a possible life-threatening exposure.

Injectable epinephrine, in a delivery system known as an “EpiPen or epinephrine auto-injector”, is commonly prescribed to people with known serious and unavoidable allergic reactions. It is a first aid measure that can save a person’s life if given promptly when a person experiences a severe allergic reaction known as anaphylactic shock; also known as anaphylaxis. The EpiPen is a single dose closed system which, when engaged, delivers epinephrine as a first aid measure. For more information on the use of an EpiPen, go to www.epipen.com.

Given that EpiPens are provided for emergency use and are widely prescribed within the general population, the Division of Developmental Disabilities does not consider the use to be governed by Rule 116, but is to be used as a first aid measure. As with all medication, appropriate use and documentation is required and will be monitored by the Division of Developmental Disabilities, Bureau of Quality Management and/or the Illinois Department of Public Health Developmental Disabilities Section, where applicable, which will consider the following guidelines during the review process:

1. Anyone should be able to assist someone experiencing a serious allergic reaction, which includes assisting someone with the use of an EpiPen.

2. If an agency serves a person with a known allergy that may require the use of an EpiPen, staff must be trained in the use of the EpiPen and be well trained in the specific clinical signs and symptoms to monitor for allergic reaction. Training can be obtained through the American Heart Association or the American Red Cross at the time of CPR training. The person’s physician can instruct on specific monitoring signs and symptoms.

3. It is standard that two “in date” (unexpired) EpiPens are available for use at all times. This is important because the duration of efficacy is limited to roughly 20 minutes. The person may require a second dose prior to the arrival of emergency services.

4. Individuals with serious allergies should have a medical alert identification in their possession when outside of their home.
5. If a person with a known history of life-threatening allergies experiences an allergic reaction, emergency services (911) must be immediately notified. Please recall that the duration of efficacy of an EpiPen is approximately 20 minutes; hence, the person must be triaged at the closest emergency department for continued assessment and treatment.

6. All people receiving services who cannot self-administer the EpiPen must be monitored by staff who are aware of the person’s condition. Monitoring by staff must continue unless that person successfully completes training to safely self-administer the EpiPen and is determined able to ensure EpiPen availability at all times.

7. Life-threatening allergies can occur immediately at the time of exposure and incapacitate an individual within a short period of time.

8. Given the serious nature of life-threatening allergies, the EpiPen auto-injector must be immediately available for use as a first aid measure.

9. Appropriate documentation of allergic reactions and use of an EpiPen is expected.

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