



Oxford University Hospitals
NHS Foundation Trust

Severe allergic reaction

Action Plan JEXT

(Pull out and keep)

Authors: Dr C. Robertson, (Paediatric Consultant with interest in allergy)
Judith Ward, Children's Allergy Nurse

March 2018

Review: March 2021

Oxford University Hospitals NHS Foundation Trust

Oxford OX3 9DU

www.ouh.nhs.uk/information



Severe allergic reaction action plan

Name: D.O.B.

Known allergies:

Contact parents/guardian:

Contact GP:

Mild or moderate symptoms	Take action!
Tingling, itching or burning sensation in the mouth	1. Give antihistamines.
Rapid development of nettle rash/wheals/hives (urticaria)	2. If prescribed, give up to 10 puffs of salbutamol (Ventolin) inhaler for mild wheeziness. Please give through a spacer if available.
Intense itching	3. Collect JEXT in case of deterioration.
Swelling, particularly of the face	4. Watch VERY carefully for any worsening of the reaction or a second phase of symptoms several hours later.
Feeling hot or very chilled	
Rising anxiety or feeling scared	
Pale or flushed	
Abdominal (tummy) pain	
Nausea and/or vomiting	
Very mild wheeziness (in known asthmatic children)	

Severe symptoms	Take action!
Difficulty in breathing – either hoarseness, noisy or wheezy breathing, croupy or choking cough or not able to talk normally.	1. Do not leave young person alone. 2. If the child is feeling faint or dizzy, lie them flat and raise their legs (place their legs down to give JEXT). If they have breathing difficulties, a supported sitting position will be better. Do NOT allow them to stand up or walk around. Give repeated reassurance.
Decreased level of consciousness, faint, floppy, very pale, blue lips, unresponsive.	3. Inject JEXT in the upper, outer part of thigh. Note time of injection. (Do not wait for ambulance to arrive or medical advice before giving JEXT.)
Collapse (unconscious)	4. If the child is unconscious, place in recovery position. Attempt resuscitation if needed. 5. Phone 999 – seek responsible person to phone for ambulance stating you have a child with anaphylaxis. 6. If no improvement after 5 -10 minutes a second dose of JEXT should be given. Note time. 7. The ambulance should always take the child to be seen in the hospital, even though they may have recovered.

Note that severe symptoms can be life-threatening so take action and don't delay!

How to give an JEXT injection

- Pull off yellow safety cap.
- Place black tip against upper, outer part of thigh, holding injector at right angle to thigh.
- Push the black tip firmly into the outer thigh until it clicks. **Do not** put your thumb over the end of the JEXT injector, as this can stop it from working.
- Hold in place for 10 seconds (slowly count out loud to 10).
- Remove JEXT and rub thigh for 10 more seconds.
- Note time JEXT was given.
- Put used JEXT out of reach. Give to ambulance crew or G.P. to dispose of in sharps bin.

Remember!
“Yellow to the sun, black to the thigh. No thumb”