



of anaphylactic reactions happened in classrooms, according to a study published in 2018, prior to COVID-19.2\*

\*Based on a study of 1,992 anaphylaxis events that occurred in schools during 2014-2015.

#### **AUVI-Q WAS DESIGNED TO BE EASY TO USE.**





**POCKET-SIZED** 



Patients should seek emergency medical care immediately after use.

AUVI-Q® (epinephrine injection, USP) is indicated in the emergency treatment of allergic reactions (Type I) including anaphylaxis to allergens, idiopathic and exercise-induced anaphylaxis. AUVI-Q is intended for patients with a history of anaphylactic reactions or who are at increased risk for anaphylaxis.

#### Important Safety Information

AUVI-Q is intended for immediate self-administration as emergency supportive therapy only and is not a substitute for immediate medical care. In conjunction with the administration of epinephrine, the patient should seek immediate medical or hospital care. Each AUVI-Q contains a single dose of epinephrine for single-use injection. More than two sequential doses of epinephrine should only be administered under direct medical supervision. Since the doses of epinephrine delivered from AUVI-Q are fixed, consider using other forms of injectable epinephrine if doses lower than 0.1 mg are deemed necessary.

Please see additional Important Safety Information on the back, and enclosed full Prescribing Information and Patient Information, or at www.auvi-q.com. Links to auvi-q.com



# ASK YOUR REPRESENTATIVE FOR THE AUVI-Q BACK-TO-SCHOOL KIT.

Designed for patients and untrained caregivers.

Digital download available at auvi-q.com/BTS-patient-kit

Links to: https://www.auvi-q.com/hcp/resources?



### **HOW TO E-PRESCRIBE**



#### **HOME DELIVERY:**

In EMR, select "ASPN" (mail order pharmacy)





#### **IN-STORE PICKUP:**

In EMR, select "Walgreens"

## Visit auvi-q.com/hcp/prescribing for more information.

Links to: https://www.auvi-q.com/hcp/ prescribing

#### Important Safety Information (cont'd)

AUVI-Q should **ONLY** be injected into the anterolateral aspect of the thigh. Do not inject intravenously, or into buttock, digits, hands, or feet. Instruct caregivers to hold the leg of young children and infants firmly in place and limit movement prior to and during injection to minimize the risk of injection-related injury.

Rare cases of serious skin and soft tissue infections have been reported following epinephrine injection. Advise patients to seek medical care if they develop any of the following symptoms at an injection site: redness that does not go away, swelling, tenderness, or the area feels warm to the touch.

Epinephrine should be administered with caution to patients with certain heart diseases, and in patients who are on medications that may sensitize the heart to arrhythmias, because it may precipitate or aggravate angina pectoris and produce ventricular arrhythmias. Arrhythmias, including fatal ventricular fibrillation, have been reported in patients with underlying cardiac disease or taking cardiac glycosides or diuretics. Patients with certain medical conditions or who take certain medications for allergies, depression, thyroid disorders, diabetes, and hypertension, may be at greater risk for adverse reactions. Common adverse reactions to epinephrine include anxiety, apprehensiveness, restlessness, tremor, weakness, dizziness, sweating, palpitations, pallor, nausea and vomiting, headache, and/or respiratory difficulties. Links to:https://www.auvi-q.com/

Please see enclosed full Prescribing Information and Patient Information, or at www.auvi-q.com.

Links to: https://www.fda.gov/safety/medwatch-fda-safetyinformation-and-adverse-event-reporting-program

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch or call 1-800-FDA-1088.

References: 1. Centers for Disease Control. CDC activities and initiatives supporting the COVID-19 response and the President's plan for opening America up again. Published May 2020. Accessed July 20, 2020. https://www.cdc.gov/coronavirus/2019-ncov/downloads/php/CDC-Activities-Initiatives-for-COVID-19-Response.pdf 2. Hogue SL, Muniz R, Herrem C, Silvia S, White MV. Barriers to the administration of epinephrine in schools. *J Sch Health*. 2018;88(5):396-404.