



*Treating anaphylaxis in infants and toddlers 16.5-33 lbs*

## WHY EPINEPHRINE AUTO-INJECTOR NEEDLE LENGTH MATTERS

To minimize the risk of injection-related injury, hold a young child's or infant's leg firmly in place when administering AUVI-q.<sup>1</sup>

Patient portrayal.



### Indication

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.

Please see additional Important Safety Information on the inside spread and back cover, and enclosed full Prescribing Information and Patient Information, or at [www.auvi-q.com](http://www.auvi-q.com).

**Auvi-q**<sup>®</sup>  
epinephrine injection, USP  
**0.1 mg** auto-injector

# Emergency department visits for anaphylaxis have increased for children 0-4 years of age<sup>2\*</sup>

## Standard 0.15 mg epinephrine auto-injectors could strike bone in children under 33 lbs<sup>3,4</sup>

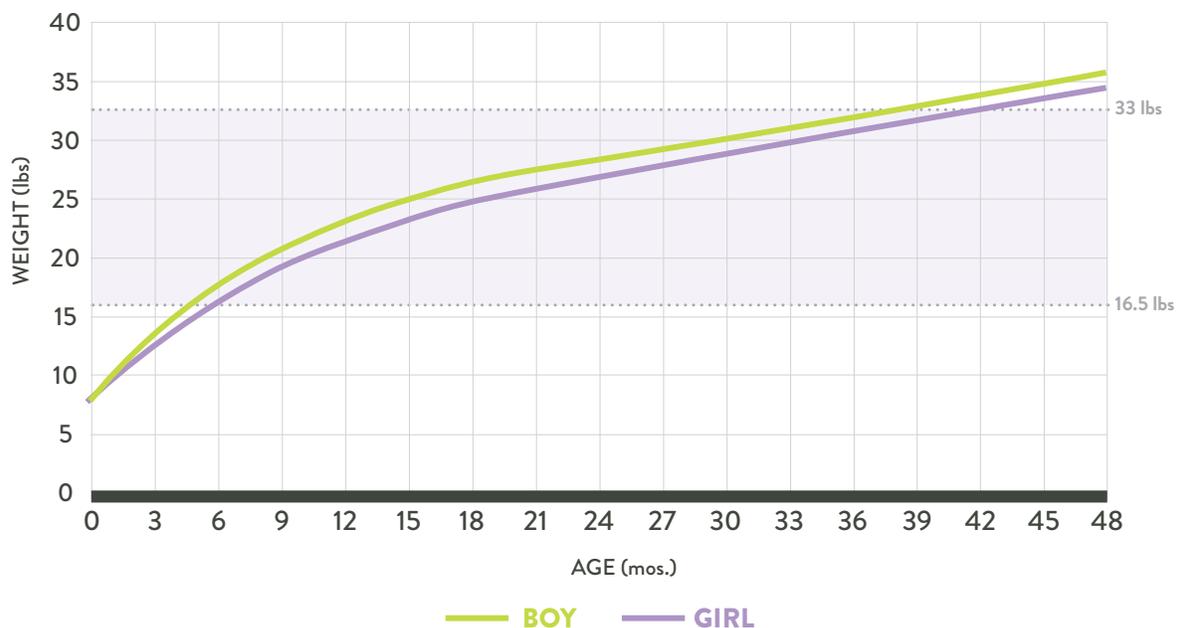


43%

of infants and toddlers weighing 16.5 lbs to 33 lbs were found to be at risk of bone strike with a 12.7 mm needle length<sup>4</sup>

Prospective, observational study using an ultrasound transducer to mimic an epinephrine auto-injector (N = 53).

### Median weight for infants and toddlers<sup>5†</sup>



- Children in the 75th percentile would not reach 33 lbs until 33 months (for boys)

\*Retrospective analysis of claims data (N = 56,212) from privately insured and Medicare Advantage enrollees.

†Age and weight values from CDC National Center for Health Statistics clinical growth charts for boys and girls.

### 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.

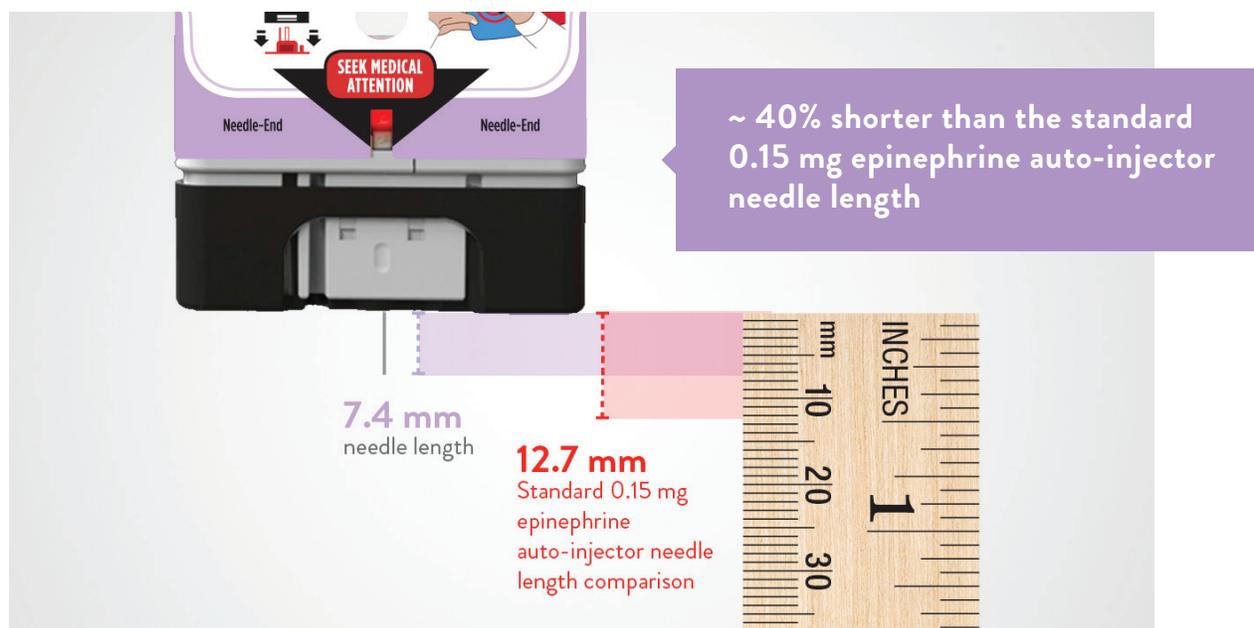
## AUVI-q 0.1 mg was designed for infants and toddlers weighing 16.5 lbs to 33 lbs



**7-8 mm**

is the optimal needle length for infants and toddlers weighing 16.5 lbs to 33 lbs according to one study<sup>4</sup>

Prospective, observational study using an ultrasound transducer to mimic an epinephrine auto-injector (N = 53).



### Important Safety Information

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.

**Auvi-q**<sup>®</sup>  
epinephrine injection, USP  
**0.1 mg** auto-injector

The only FDA-approved epinephrine auto-injector for infants and toddlers 16.5 lbs to 33 lbs



**STEP-BY-STEP VOICE INSTRUCTIONS**



**INTUITIVE DESIGN**



**AUTO-RETRACTABLE NEEDLE**

Caregivers should seek emergency medical care immediately after use.<sup>1</sup>

## HOW TO PRESCRIBE



**HOME DELIVERY:**

In EMR, select “ASPEN”  
(mail order pharmacy)



**IN-STORE PICKUP:**

In EMR, select “Walgreens”

If you don't have an EMR system, visit [auvi-q.com/hcp](https://www.auvi-q.com/hcp) for alternate prescribing instructions or call **1-877-30-AUVIQ** for assistance in the enrollment process.

### Important Safety Information

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.

**Please see enclosed full Prescribing Information and Patient Information, or at [www.auvi-q.com](https://www.auvi-q.com).** You are encouraged to report negative side effects of prescription drugs to the FDA. Visit [www.fda.gov/medwatch](https://www.fda.gov/medwatch) or call 1-800-FDA-1088.

**References:** **1.** AUVI-Q [Prescribing Information]. Richmond, VA: kaleo Inc.; <https://dailymed.nlm.nih.gov/dailymed/fda/fdaDrugXsl.cfm?setid=6180fb40-7fca-4602-b3da-ce62b8cd2470&type=display> **2.** Motosue M, Bellolio MF, Van Houten HK, Shah ND, Campbell RL. Increasing emergency department visits for anaphylaxis, 2005-2014. *J Allergy Clin Immunol Pract.* 2017;5(1):171-175.e1-3. **3.** Kim L, Nevis IF, Tsai G, et al. Children under 15 kg with food allergy may be at risk of having epinephrine auto-injectors administered into bone. *Allergy, Asthma & Clinical Immunology.* 2014;10(40): 1-6. **4.** Kim H, Dinakar C, McInnis P, et al. Inadequacy of current pediatric epinephrine autoinjector needle length for use in infants and toddlers. *Ann Allergy Asthma Immunol.* 2017;118(6):719-725.e1. **5.** Data Table of Infant Weight-for-age Charts. Centers for Disease Control and Prevention. Accessed August 7, 2020. [https://www.cdc.gov/growthcharts/html\\_charts/wtageinf.htm](https://www.cdc.gov/growthcharts/html_charts/wtageinf.htm)