

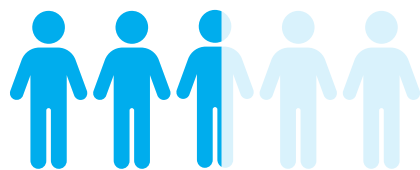
**Auvi-Q**  
epinephrine injection, USP  
0.1 mg/0.15 mg/0.3 mg auto-injectors

## FITTING IN IS IMPORTANT FOR TEENS—

Give them an epinephrine auto-injector that doesn't stick out.

45% of anaphylactic events in school occurred in grades 9-12<sup>1\*</sup>

### ABOUT HALF OF TEENS



fail to consistently carry epinephrine particularly when wearing tight clothes.<sup>2-4†</sup>



have knowingly eaten allergen-containing foods.<sup>2,5†</sup>

### A MEDICAL DEVICE THAT DOESN'T LOOK LIKE ONE



Watch to learn more about treating teens with life-threatening allergies: [auvi-q.com/teen](http://auvi-q.com/teen)

\*Survey data from 736 K-12 schools that recorded an anaphylactic event (n = 891) during the 2013-2014 school year.

†Based on a 2006 survey from 174 adolescents and young adults with food allergies (ages 13-21).

#### 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.

#### 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 page 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/0.15 mg/0.3 mg auto-injectors

BEING A TEENAGER  
WITH LIFE-THREATENING  
ALLERGIES IS HARD.  
CARRYING EPINEPHRINE  
SHOULD BE EASY.



**AUVI-Q WAS DESIGNED TO BE EASY TO CARRY AND USE.**



POCKET SIZED



VOICE INSTRUCTIONS



AUTO-RETRACTABLE NEEDLE

Patients should seek emergency medical care immediately after use.

**LEARN ABOUT THE AUVI-Q SAVINGS OFFER FOR PATIENTS AT [AUVI-Q.COM/SAVINGS](https://www.auvi-q.com/savings)**

### 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.

**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. White MV, Hogue SL, Odom D, et al. Anaphylaxis in schools: Results of the EPIPEN4SCHOOLS Survey combined analysis. *Pediatr Allergy Immunol Pulmonol*. 2016;29(3):149-154. 2. Sampson MA, Muñoz-Furlong A, Sicherer SH. Risk-taking and coping strategies of adolescents and young adults with food allergy. *J Allergy Clin Immunol*. 2006;117(6):1440-1445. 3. Warren CM, Zaslavsky JM, Kan K, Spergel JM, Gupta RS. Epinephrine auto-injector carriage and use practices among US children, adolescents, and adults. *Ann Allergy Asthma Immunol*. 2018;121(4):479-489.e2. 4. Portnoy J, Wade RL, Kessler C. Patient carrying time, confidence, and training with epinephrine autoinjectors: The RACE Survey. *J Allergy Clin Immunol Pract*. 2019;7(7):2252-2261. 5. Warren CM, Dyer AA, Otto AK, et al. Food allergy-related risk-taking and management behaviors among adolescents and young adults. *J Allergy Clin Immunol Pract*. 2017;5(2):381-390.e13.