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# DATASHEET

## FOOD ALLERGIES AND ANAPHYLACTIC SHOCK POSTER



- Provides essential information on common allergies and the treatment of allergies and anaphylactic shock
- A2 size, 59x42cm
- Fully coloured illustrated images and clear, easy to follow text
- Clear step by step instructions for treating someone who is suffering from a food allergy
- Laminated finish for superior durability

**Food Allergies & Anaphylactic Shock**

**1. Common allergens**

**Allergy**  
An allergy is the body's unusual response to a normally harmless substance. Allergens can present in various ways and can range from mild to severe.

**Anaphylactic Shock**  
Anaphylactic Shock is a severe allergic reaction at the extreme end of the allergic response range. The whole body is affected, usually within minutes of exposure to the allergen. Not everyone is at risk of anaphylaxis, but for those who are, it can be fatal. Anaphylactic Shock has the potential to be fatal as it can cause severe to the casualty's airway and breathing.

**Common food allergen symbols to look out for**

Wheat, Corn, Soy, Milk, Eggs, Peanuts, Tree Nuts, Shellfish, Sesame Oil, Mustard, Lupin, Molluscs, Sulphur Dioxide, Fish.

**2. Recognising an allergic reaction**

**Common symptoms that can occur during an allergic reaction:**

- Sneezing / wheezing / coughing / shortness of breath
- Red itchy rash / itchy skin, sometimes with raised areas
- Swelling, often in hands, feet or face (can be anywhere)
- Abdominal pain, nausea, vomiting and diarrhoea
- Widespread flushing of the skin
- Itchy eyes, ears, lips, throat and mouth
- Difficulty breathing
- Feeling of confusion and fear

**3. Treatment of allergy**

• Ask the casualty if they have any known allergies.

• Assess how serious the allergic reaction is by looking at their symptoms.

• If the casualty has medication for an allergy encourage them to take it.

• Call the Emergency Medical Services (EMS) by dialling 999/112.

**4. Recognising Anaphylactic Shock**

**Common symptoms that occur during Anaphylactic Shock:**

- A rash on the skin
- Swelling
- Anxiety, often a feeling of doom
- Life threatening airway, breathing or circulation problems (sometimes a combination of these)
- Airway - swelling of the throat, mouth or lips - feeling of throat closing
- You may recognise this from loud breathing or a hoarse voice
- Breathing / wheezing / feeling of a tight chest
- Appears similar to an asthma attack
- Circulation - sudden feeling of weakness, dizziness or faint
- May appear pale with clammy skin and a fast pulse. Other symptoms, vomiting and retention changes.

**5. Treatment of Anaphylactic Shock**

- Immediately call the EMS by dialling 999/112.
- Assist the casualty to administer adrenaline using their auto injector.
- Massage injection site area for 10 seconds after injection.
- Place casualty in a sitting position (making it easier for them to breathe).
- Help the casualty to sit up in the position that best relieves any breathing difficulties.
- If casualty becomes pale with a weak pulse, help them to lie down with legs raised and head at shock.
- Monitor and record vital signs while waiting for help to arrive.
- Give a second auto injector 5 minutes after the first if there is no improvement.

**6. Unresponsive - Not Breathing**

If the casualty becomes unresponsive commence CPR.

1a. Ensure the casualty is on a firm, flat surface.

1b. Place the heel of one hand on top of the other in the centre of the casualty's chest.

2. Compress the chest (maximum depth of approximately 5-6cm) 30 times at a rate of 100-120 compressions per minute. The compressions and releases should take an equal amount of time.

3a. After 30 compressions, open the airway again using head tilt/chin lift.

3b. Seal the nose with your thumb and forefinger. (Pg 1)

4. Blow steadily to the mouth until you see the chest rise. 2 rescue breaths, blow in for 1 second, 2 breaths within 10 seconds. (Pg 2)

5. Remove your mouth to the side and let the chest fall. Shake some fresh air, when breathing for the casualty.

6. Repeat so you have given 2 effective rescue breaths in total within 10 seconds.

7. If chest does not rise after the second breath, go back to 30 compressions then try again with 2 breaths.

8. Return your hands to the correct position on the chest and give a further 30 chest compressions.

9. Continue with CPR until:

- The casualty shows signs of recovery.
- You become exhausted and unable to continue.
- Emergency Services arrive.
- The situation changes and you are now in immediate danger.

**7. Defibrillation**

Use an AED (Automated External Defibrillator) if available and follow prompts.

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The information contained in this poster is for guidance only and should not be used as a substitute for recognised training.

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