



LIFESAVING SOCIETY®

The Lifeguarding Experts

EPINEPHRINE ADMINISTRATION IN THE NLS PROGRAM

POSITION STATEMENT

STATEMENT:

To ensure that appropriate emergency care is immediately available to those suffering from anaphylactic shock, the revised NLS program in Newfoundland and Labrador (effective January, 2005) will train candidates in the correct administration of epinephrine through the use of an epinephrine auto-injector device such as the EpiPen®.

BACKGROUND:

Approximately 1 to 2% of Canadians live with the risk of a serious allergic reaction known as anaphylactic shock. It is widely accepted that epinephrine is the medication of choice in mitigating the effects of anaphylactic shock and that its immediate use is imperative in preventing death. Data clearly shows that as many as 80% of anaphylactic shock incidents occur outside the home, causing those with known predisposition to the condition to carry a device allowing administration of epinephrine when required.

It is important to note that the protocol calls for lifeguard administration of epinephrine only if the victim cannot do it and a person accompanying the victim is either not trained or also unable to administer the epinephrine.

STATEMENT RATIONALE:

Due to the significant potential for anaphylactic shock within the population, and considering that its effects may leave the patient unable to self-administer prescribed medication, lifeguard training should include the method for administering the EpiPen® and treatment for anaphylactic shock.

Until recently, the position of the Lifesaving Society with respect to all medication administration is that a rescuer --- whether lifeguard or lifesaver --- must not administer a patient's medication. A rescuer was only to assist with the administration of medication. The introduction of EpiPen® administration by lifeguards, although a departure from previous policy, is seen as acceptable due to the ease of administration and the minimal risk resulting from inappropriate

use of epinephrine. It is also recognized that anaphylactic shock is a life-threatening condition and not administering the medication will have serious consequences.

RESEARCH:

Extensive research into the use of epinephrine and its administration by non-medical personnel has been done resulting in the Canadian Society for Allergy and Clinical Immunology and Anaphylaxis Canada endorsing that all individuals entrusted with the care of children have familiarity with basic first aid and resuscitative techniques including formal training on how to use epinephrine auto-injector devices such as the EpiPen[®]. It has been proven that there are clearly no contraindications to using epinephrine when treating a life-threatening allergic reaction.

At the Lifesaving Society national level, when developing the first aid program, Human Resources Development Canada (HRDC) and Health Canada specified that administration of the EpiPen[®] be included in order to meet the accreditation requirements for the Standard First Aid (SFA) course. In addition, national Medical Advisor, Dr. Steve Beerman, has reviewed the protocol and approved the change.

At the Lifesaving Society Branch level, Newfoundland and Labrador Medical Advisor, Dr. Chris Holden, and Legal Advisor, Chris King, have reviewed the change in policy and have endorsed the new protocol as reasonable. The protocol is contained in Appendix A of the NLS Award Guide.