

Mylan's Commitment to Access in Schools

EpiPen[®] (epinephrine injection, USP) Auto-Injectors

Since 2012, more than 900,000 free epinephrine auto-injectors have been distributed to more than 73,000 schools – more than half of all U.S. schools.



occur at school.

Access to epinephrine – the only first-line treatment

for anaphylaxis – in schools is more important than ever.

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Mylan offers the EpiPen4Schools® program to qualifying*

public and private kindergarten, elementary, middle and

high schools in the U.S. to help those in the school

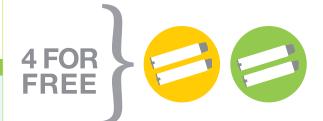
environment become more aware of the risk of

anaphylaxis, a life-threatening allergic reaction, and

be better prepared to respond should anaphylaxis

THE RATE OF FOOD ALLERGIES CONTINUES TO RISE. IN THE U.S. AN ESTIMATED 1 IN 13 CHILDREN IS AFFECTED.

*A school will only receive epinephrine auto-injectors in accordance with all applicable laws. A school must submit a valid prescription in order to qualify for this program.



Schools participating in the program receive four free epinephrine autoinjectors in the form of two (2) two-packs of the 0.3mg dosage, two (2) two-packs of the 0.15mg dosage or one (1) two-pack of each dosage.

Indications

EpiPen® (epinephrine injection, USP) 0.3 mg and EpiPen Jr® (epinephrine injection, USP) 0.15 mg Auto-Injectors are for the emergency treatment of life-threatening allergic reactions (anaphylaxis) caused by allergens, exercise, or unknown triggers; and for people who are at increased risk for these reactions. EpiPen® and EpiPen Jr® are intended for immediate administration as emergency supportive therapy only. Seek immediate emergency medical help right away.

Important Safety Information

Use EpiPen[®] or EpiPen Jr[®] Auto-Injectors right away when you have an allergic emergency (anaphylaxis). **Get emergency medical help right away.** You may need further medical attention. Only a healthcare professional should give additional doses of epinephrine if you need more than two injections for a single anaphylactic episode.

Please see additional Important Safety Information on next page. Please see accompanying full Prescribing Information and Patient Information.



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Schools can only participate in the program once, and when an epinephrine auto-injector is used or if it expires, schools must replace it at their own expense.



Schools are eligible to participate in the *EpiPen4Schools*[®] program and receive four free epinephrine auto-injector each calendar year.

If the supply is used to respond to a life-threatening allergic reaction (anaphylaxis) it will be replenished free of charge.



Schools must purchase additional product in order to participate in the *EpiPen4Schools* program.



There are no purchase requirements for participation in the program.



There is no need for a program like this. Students who know they have potentially life-threatening (severe) allergies carry their own epinephrine auto-injectors.



Not everyone at risk for anaphylaxis knows that they are. According to the Centers for Disease Control and Prevention, 25% of anaphylaxis cases reported at school occurred in children who had not been previously diagnosed with a food allergy.

According to a survey of more than 12,000 schools participating in the *EpiPen4Schools* program, in half (49.8%) of the instances where an epinephrine auto-injector was used to treat anaphylaxis, an epinephrine auto-injector provided through the program was used.



If a school participates in the *EpiPen4Schools* program, students and staff who know they are at risk for anaphylaxis do not need to bring their own medication to school.



Epinephrine auto-injectors supplied to schools through the *EpiPen4Schools* program are not meant to replace an individual's emergency anaphylaxis treatment.



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instances where an epinephrine autoinjector was used to treat anaphylaxis, an epinephrine autoinjector provided through the program was used.



12,275 participating schools surveyed in the 2014-2015 school year

Important Safety Information (cont'd)

EpiPen® or EpiPen Jr® should **only** be injected into the middle of your outer thigh (upper leg), through clothing if necessary. Do not inject into your veins, buttocks, fingers, toes, hands or feet. Hold the leg of young children firmly in place before and during injection to prevent injuries. In case of accidental injection, please seek immediate medical treatment.

Rarely, patients who have used EpiPen® or EpiPen Jr® may develop an infection at the injection site within a few days. Some of these infections can be serious. Call your healthcare professional right away if you have any of the following at an injection site: redness that does not go away, swelling, tenderness, or the area feels warm to the touch.

Tell your healthcare professional about all of your medical conditions, especially if you have asthma, a history of depression, thyroid problems, Parkinson's disease, diabetes, high blood pressure or heart problems, have any other medical conditions, are pregnant or plan to become pregnant, or are breastfeeding or plan to breastfeed. Be sure to also tell your healthcare professional all the medicines you take, especially medicines for asthma. **If you have certain medical conditions, or take certain medicines, your condition may get worse or you may have longer lasting side effects when you use EpiPen® or EpiPen Jr®**.

Common side effects include fast, irregular or "pounding" heartbeat, sweating, nausea or vomiting, breathing problems, paleness, dizziness, weakness, shakiness, headache, feelings of over excitement, nervousness or anxiety. These side effects usually go away quickly if you lie down and rest. **Tell your healthcare professional if you have any side effect that bothers you or that does not go away.**

Please see accompanying full Prescribing Information and Patient Information.

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.

For additional information, please contact us at 800-395-3376.

Mylan's Commitment to Access in Public Places

34%

34% OF FOOD ALLERGIC INDIVIDUALS HAVE EXPERIENCED AT LEAST ONE FOOD ALLERGIC REACTION IN A RESTAURANT



ONE IN 10 MANAGERS, FOOD WORKERS AND SERVERS INCORRECTLY BELIEVED THAT A PERSON ALLERGIC TO A SPECIFIC FOOD INGREDIENT CAN SAFELY EAT SMALL AMOUNTS OF THAT FOOD.

To further expand our commitment, Mylan is continuing work to expand access to epinephrine in places beyond schools, such as restaurants, colleges and universities, so personnel are equipped to assist individuals experiencing anaphylaxis in these various settings. According to a 2007 survey, 34% of food allergic individuals have experienced at least one food allergic reaction in a restaurant; in a 2001 investigation, in 45% of peanut and tree nut allergic reactions in restaurants or other food service establishments, the food allergic customers had alerted the restaurant to their severe allergy in advance. Additionally, according to a recent study, one in 10 managers, food workers and servers incorrectly believed that a person allergic to a specific food ingredient can safely eat small amounts of that food. These findings suggest that restaurant staff is not adequately prepared for these emergencies and that additional education and access to epinephrine is necessary.

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