

Allergic Reaction/Anaphylaxis

1. Universal Patient Care

Basic Care Guidelines

2. If the patient is complaining of shortness of breath, has signs of respiratory distress, or pulse oximetry is less than 94%, titrate oxygen for symptom improvement or to maintain oxygen saturation of 94-98%
3. Respiratory distress with wheezing:
 - a. Albuterol 2.5-5 mg (if available), nebulized at 8 lpm oxygen
4. Anaphylaxis:
 - a. If the patient has a physician-prescribed Auto-Inject Epinephrine, assist with administering it for signs of anaphylaxis

Advanced Care Guidelines

5. Allergic reaction (urticaria or pruritus):
 - a. Diphenhydramine:
 - i. Adult: 25-50 mg IM/IV; Pediatric: 1 mg/kg IM/IV, up to 50 mg
6. Anaphylaxis:
 - a. Epinephrine (1:1000):
 - i. Over 25 kg: 0.3 mg IM; Under 25 kg: 0.15 mg IM:
 1. If signs of anaphylaxis persist following the first dose of epinephrine, repeat every 5-15 minutes
 2. Dexamethasone 10 mg IV
7. Hypoperfusion (systolic blood pressure less than 90 mmHg):
 - a. Normal Saline:
 - i. 20 mL/kg IV/IO
8. Anaphylaxis refractory to IM Epinephrine, consider *ONE* of the following Epinephrine Infusions [1 mg in 1000 mL NS (1 mcg/mL)]:
 - a. Adult: 0.05 mcg/kg/min IV/IO
 - i. Initiate 0.05 mcg/kg/min and titrate to maintain a systolic blood pressure of 90 mmHg or MAP of 65
 - b. Adult: 5-15 mcg/min IV/IO
 - i. Initiate 5 mcg/min and titrate to maintain a systolic blood pressure of 90 mmHg or MAP of 65, or max of 15 mcg/min is reached
9. If the patient is in peri-arrest, consider epinephrine push-dose 10-20 mcg