



ALLERGIC REACTION / ANAPHYLAXIS

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BLS

ALS

- Ensure patent airway
- O₂ saturation PRN
- O₂ and/or ventilate PRN
- Attempt to identify allergen and route (injected, ingested, absorbed, or inhaled)
- Remove allergen (e.g., stinger, injection mechanism), if possible
- Epinephrine auto-injector
 - Patient 15 to 33 kg (33 to 73 lbs), 0.15 mg IM x1
 - Patient ≥33 kg (≥73 lbs), 0.3 mg IM x1

OR

Assist patient to self-medicate own prescribed epinephrine auto-injector or albuterol MDI **once only**. BH contact required for additional dose(s)

Assess for hypotension

- <1 month: SBP <60 mmHg
- 1 month – 1 year: SBP <70 mmHg
- 1 year – 10 years:
SBP <70 mmHg + (2x age in years)
- ≥10 years: SBP <90 mmHg

- Monitor/ECG
- IV/IO [Ⓐ]
- Capnography

Allergic reaction (skin signs only)

- Urticaria (hives, rash)
- Erythema (flushing)
- Pruritus (itching)

Allergic reaction treatment

- Diphenhydramine per drug chart IV/IM

Suspected anaphylaxis reaction

- Respiratory: throat tightness, hoarse voice, wheezing/stridor, cough, SOB
- Cardiovascular: fainting, dizziness, tachycardia, low BP
- GI: nausea, vomiting, abdominal cramping
- Tissues: angioedema of eyelids, lips, tongue, face

Anaphylaxis treatment

- Epinephrine 1:1,000 (1 mg/mL) per drug chart IM (lateral thigh), MR x2 q5 min [Ⓐ] **then**
- Diphenhydramine per drug chart IV/IM

If respiratory involvement¹

- Albuterol/Levalbuterol per drug chart via nebulizer, MR [Ⓐ]
- Ipratropium bromide per drug chart via nebulizer added to first dose of albuterol/levalbuterol

Respiratory distress with stridor at rest

- Epinephrine 1:1,000 per drug chart (combined with 3 mL normal saline) via nebulizer, MR x1

Severe anaphylaxis or inadequate response to treatment

- Fluid bolus IV/IO per drug chart MR to maintain adequate perfusion [Ⓐ]
- Push-dose epinephrine 1:100,000 (0.01 mg/mL) per drug chart IV/IO, MR q3 min, titrate to adequate perfusion or improvement in status

Push-dose epinephrine mixing instructions

1. Remove 1 mL normal saline (NS) from the 10 mL NS syringe

¹ **Infection control:** If concerned about aerosolized infectious exposure, substitute with MDI, if available

	<p>2. Add 1 mL of epinephrine 1:10,000 (0.1 mg/mL) to 9 mL NS syringe The mixture now has 10 mL of epinephrine at 0.01 mg/mL (10 mcg/mL) concentration.</p>	
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