## BLS
- Ensure patent airway
- O₂ Saturation prn
- O₂ and/or ventilate prn
- Remove sting/injection mechanism
- May assist patient to self-medicate own prescribed epinephrine auto injector or MDI **ONE TIME ONLY**. Base Hospital contact required prior to any repeat dose.
- Epinephrine auto-injector 0.15mg IM x1

## ALS
- Monitor EKG
- IV/IO SQ adjust prn

**Hives (Urticaria):**
- Diphenhydramine per drug chart IV/IM SQ

### Anaphylaxis:
- **Anaphylaxis:**
  - Epinephrine 1:1000 per drug chart IM SO MR x2 q5 minutes SO
  - then
  - Fluid bolus IV/IO per drug chart SO to maintain adequate perfusion MR SO
  - Diphenhydramine per drug chart IV/IM SQ
  - Albuterol per drug chart via nebulizer SO for respiratory involvement MR SQ
  - Atrovent per drug chart via nebulizer added to first dose of Albuterol SO for respiratory involvement
  - Epinephrine 1:10,000 per drug chart IV/IO BHO MR x2 q3-5 minutes BHO

### Anaphylaxis criteria (may include any):
1. **Unknown exposure**: Skin and respiratory and/or cardiovascular
2. **Likely allergen exposure** (e.g. bee sting, peanut): 2/4 systems involved (skin, GI, respiratory, cardiovascular)
3. **Known allergen exposure**

**Angioedema**: lip/tongue/face swelling/difficulty swallowing, throat tightness, hoarse voice

Note: In pediatric anaphylaxis, the maximum Epinephrine dose is 0.1 mg IV/IO (should not exceed adult dose).