**Pediatric Anaphylaxis/Allergic Reaction**

**Pre-Medical Control**

MFR/EMT/SPECIALIST/PARAMEDIC

1. Follow *Pediatric Assessment and Treatment Protocol*.
2. Determine substance or source of exposure, remove patient from source if known and able.
3. Assist the patient in administration of their own epinephrine auto-injector, if available.

**EMT/SPECIALIST**

4. In cases of severe allergic reaction, wheezing or hypotension:
   
   A. If child appears to weigh less than 10 kg (approx. 20 lbs.), contact medical control prior to epinephrine if possible.
   
   B. If child weighs between 10-30 kg (approx. 60 lbs.); administer Epi-Pen Jr.
   
   C. Child weighing greater than 30 kg; administer Epi-Pen.

5. Albuterol may be indicated. Refer to *Nebulized Bronchodilators Procedure*.

**PARAMEDIC**

6. If patient is symptomatic, administer diphenhydramine 1 mg/kg IM/IV/IO (maximum dose 50 mg).

7. In cases of severe allergic reaction, wheezing or hypotension:
   
   A. If child appears to weigh less than 10 kg (approx. 20 lbs.), contact medical control prior to epinephrine if possible.
   
   B. Child weighing less than 30 kg (approx. 60 lbs.); administer Epinephrine 1:1000, 0.15 mg (0.15 ml) IM OR via Epi-Pen Jr., if available.
   
   C. Child weighing greater than 30 kg; administer Epinephrine 1:1000, 0.3 mg (0.3 ml) IM OR via Epi-Pen if available.

8. In cases of profound anaphylactic shock (near cardiac arrest):
   
   A. Administer Epinephrine 1:10,000, 0.01 mg/kg (0.1 ml/kg) slow IV/IO to a maximum of 0.3 mg (3 ml).

9. Per MCA selection, administer Bronchodilator per *Nebulized Bronchodilators Procedure*.
10. Per MCA Selection administer Prednisone OR Methylprednisolone.

**Medication Options:**

**Prednisone**
50 mg tablet PO
*(Children 6 and above, if tolerated)*

☑ YES ☐ NO

**Methylprednisolone**
2 mg/kg IV/IO,
*(maximum dose 125 mg)*

☑ YES ☐ NO

**Post-Medical Control:**

1. Additional Epinephrine 1:1,000, 0.01 mg/kg (0.01 ml/kg) IM to a maximum of 0.3 mg (0.3 ml), OR via auto-injector.
2. Administer Epinephrine 1:10,000, 0.01 mg/kg (0.1 ml/kg) to a maximum of 0.3 mg (3 ml) slow IV/IO.
Follow Pediatric Assessment & Treatment Protocol

- Determine substance or source of exposure, remove patient from source if known and able
- Assist the patient in administration of their own epinephrine auto-injector, if available.

If patient symptomatic, administration diphenhydramine 1 mg/kg IM/IV/IO (max dose 50 mg)

In cases of severe allergic reaction, wheezing or hypotension:
- If child appears to weigh less than 10 kg (approx. 20 lbs.); contact Medical Control prior to Epinephrine, if possible.
- Child weighing less than 30 kg (approx. 60 lbs.); administer Epinephrine 1:1000, 0.15 mg (0.15ml) IM OR via Epi-Pen Jr., if available.
- Child weighing greater than 30 kg; administer Epinephrine 1:1000, 0.3 mg (0.3ml) IM OR via Epi-Pen Jr., if available.

In cases of profound anaphylactic shock (near cardiac arrest):
- Administer Epinephrine 1:10,000, 0.01 mg/kg (0.1 ml/kg) slow IV/IO, to a maximum of 0.3 mg (3 ml)

Contact Medical Control

Contact Medical Control

Additional Epinephrine 1:1,000, 0.01 mg/kg (0.01 ml/kg) IM to a maximum of 0.3 mg (0.3 ml), OR via auto injector

Medication Options

**Prednisone**
50 mg tablet PO (Children 6 and above, if tolerated)

- ✔ YES
- ☐ NO

**Methylprednisolone**
2 mg/kg IV/IO, (maximum dose 125 mg)

- ✔ YES
- ☐ NO