

Anaphylaxis/Allergic Reaction

1. Follow **General Pre-hospital Care Protocol**.
2. Determine substance or source of exposure, remove patient from source if known and able.
3. In cases of severe allergic reaction, wheezing or hypotension, administer Epinephrine 1mg/mL via Epi auto-injector.
 - a. Assist the patient in administration of their own epinephrine auto-injector, if available.
 - b. Adult Epinephrine auto-injector OR 0.3 mg (0.3 mL) of Epinephrine 1 mg/mL IM.



MCA Approval of Epinephrine auto-injector for select MFR Agencies:

NO

MCA Approval of DEMCA Epi-Kits for select BLS licensed units:

YES



- i. If child weighs less than 10 kg (approx. 20 lbs.), contact medical control prior to Epinephrine
 - ii. If child weighs between 10-30 kg (approx. 60 lbs.); administer 0.15 mg (0.15 mL) of Epinephrine 1 mg/mL IM OR via Pediatric Epinephrine auto-injector.
 - iii. Child weighing greater than 30 kg; administer 0.3 mg (0.3 mL) of Epinephrine 1 mg/mL IM OR via Epinephrine auto-injector.
 - iv. May repeat at 3-5 minute intervals if the patient remains hypotensive, if available.
6. Albuterol may be indicated. Refer to **Nebulized Bronchodilators Procedure**.



7. Administer a Normal Saline IV/IO fluid bolus.
 - a. The standard NS IV/IO fluid bolus volume will be up to 1 liter, wide open, repeated as necessary, unless otherwise noted by protocol. IV/IO fluid bolus is contraindicated with pulmonary edema.
 - b. Fluid should be slowed to TKO when SBP greater than 90 mm/Hg.
- i. For pediatrics, fluid bolus should be 20 mL/kg, and based on signs/symptoms of shock.



8. If patient is symptomatic, administer Diphenhydramine.
 - a. Adult 50 mg IM or IV/IO.
 - b. Pediatric 1 mg/kg IM/IV/IO (maximum dose 50 mg).
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 y/o)

Methylprednisolone
Adult 125 mg IV/IO/IM or



Pediatric 2 mg/kg IV/IO/IM (max 125 mg)

11. For MCA with both selected, Prednisone PO is the preferred medication. Methylprednisolone is secondary and reserved for when a PO route is inappropriate.

12. If patient remains hypotensive after treatment, refer to **Shock Protocol**.



14. If patient is symptomatic after treatment without hypotension.



a. Additional epinephrine via auto-injector OR additional 0.3 mg (0.3 mL) of Epinephrine 1 mg/mL IM.