

# ALLERGIC REACTION



## INFORMATION

S/S: Allergic reactions are characterized by any of the following: urticaria, mild respiratory distress, difficulty swallowing, or swelling of the tongue and/or face.



## ADULT

### FOR GENERALIZED URTICARIA ONLY

BENADRYL: 50mg IV/IO/IM. Administer over 2 minutes for IV/IO usage. (See Box Below)

### FOR MILD AIRWAY SWELLING / MILD RESPIRATORY DISTRESS / BRONCHOSPASM / TONGUE AND/OR FACIAL SWELLING

EPINEPHRINE: (1:1,000) 0.3mg (0.3mL) IM. May repeat 2x prn in five minute intervals.

- *Do not administer within 5 minutes of Epi-Pen administration*

BENADRYL: 50mg IV/IO/IM. Administer over 2 minutes for IV/IO usage. (See Box Below)

ALBUTEROL: For bronchospasm, 2.5mg via nebulizer, repeat prn.

### ANAPHYLACTIC SHOCK - CHARACTERIZED BY THE SIGNS AND SYMPTOMS OF AN ALLERGIC REACTION, IN ADDITION TO THE LOSS OF A RADIAL PULSE AND/OR SBP OF LESS THAN 90mmHg

Establish a second IV/IO.

EPINEPHRINE: (1:10,000) 0.1mg (diluted in 9mL of Saline), IV/IO over 1-2 minutes. May repeat 2x prn, in five minute intervals. Max total dose 0.3mg (See Box Below)

If patient remains hypotensive: **NORMAL SALINE:** 1-2L. Assess lung sounds and BP every 500 mL.

Administer **BENADRYL** and **ALBUTEROL** as noted above.

Contact medical control, if necessary, for additional orders of **EPINEPHRINE (1:10,000)** and fluid boluses.

**BENADRYL ADMINISTRATION IV/IO:** Dilute with 9 mL of Normal Saline.

Discard 9 mL of Epi 1:10,000 and draw up 9 mL of Normal Saline and administer over 1-2 minutes. You may repeat 2x prn, in five minute intervals.



## PEDIATRIC

### FOR GENERALIZED URTICARIA ONLY

- BENADRYL:** 1mg/kg IV/IO *or* IM if unable to obtain IV access. Max total dose 50mg. Administer over 2 minutes for IV/IO usage. (See Box Below)

### FOR MILD AIRWAY SWELLING / MILD RESPIRATORY DISTRESS / BRONCHOSPASM / TONGUE AND/OR FACIAL SWELLING

- EPINEPHRINE:** (1:1,000) 0.01mg/kg (0.01mL/kg) IM. Max single dose 0.3mg. May repeat 2x prn, in 5 minute intervals.
- BENADRYL:** 1mg/kg IV/IO *or* IM if unable to obtain IV access. Max total dose 50mg. Administer over 2 minutes for IV/IO usage. (See Box Below)
- ALBUTEROL:** For bronchospasm, 2.5mg via nebulizer, repeat prn.

### ANAPHYLACTIC SHOCK - CHARACTERIZED BY THE SIGNS AND SYMPTOMS OF AN ALLERGIC REACTION, IN ADDITION TO THE LOSS OF DISTAL PULSES

- Establish a second IV/IO.
- EPINEPHRINE:** (1:10,000) 0.1mg (diluted in 9mL of Saline), titrate slowly over 5-10 minutes IV/IO (titrate to effect). May repeat 2x prn, in five minute intervals. (See Box Below)
- If patient remains hypotensive: **NORMAL SALINE:** 20mL/kg bolus IV/IO, may repeat 2x prn for hypotension. Check lung sounds often.
- Administer **BENADRYL** and **ALBUTEROL** as noted above.
- Contact medical control if necessary for additional fluid boluses.

**BENADRYL ADMINISTRATION IV/IO:** Dilute with 9 mL of Normal Saline.

Discard 9 mL of Epi 1:10,000 and draw up 9 mL of Normal Saline and administer over 5-10 minutes (titrate to effect). You may repeat 2x prn, in five minute intervals.