

APPROVED: Signature On File In EMS Office
Executive Director

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Medical Director

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PEDIATRIC ALLERGIC REACTION

- I. AUTHORITY: Health and Safety Code, Division 2.5, California Code of Regulations, Title 22, Division 9
- II. PURPOSE: To serve as the treatment standard for EMTs and Paramedics within their scope of practice.
- III. PROTOCOL:

STANDING ORDERS	
ASSESS	CAB
REMOVE ALLERGEN	If possible (e.g. bee stinger) and apply ice to site.
OXYGEN	Oxygen delivered as appropriate.
MONITOR	Treat rhythm as appropriate.
MILD REACTION (hives, rash, swelling)	
IV ACCESS	TKO with microdrip tubing and volume control chamber.
DIPHENHYDRAMINE	1 mg/kg IV/IO/IM (maximum dose 25 mg) for severe itching.
SEVERE REACTION/ANAPHYLAXIS (wheezing, stridor, hypotension, severe respiratory depression, oral swelling, altered mental status)	
EPINEPHRINE	0.01 mg/kg of 1:1,000 IM (maximum dose 0.3 mg).
IV/IO ACCESS	TKO with microdrip tubing and volume control chamber.
DIPHENHYDRAMINE	1 mg/kg IV/IO/IM (maximum dose 50 mg) for severe itching.
ALBUTEROL	If wheezing or stridor: 3.0 ml in 15 ml saline (or 6 unit dose vials) via nebulizer over 1 hour, or until symptoms improve. If patient intubated, administer dose through aerosol holding chamber. Repeat as needed.
BASE PHYSICIAN ORDERS	
EPINEPHRINE	0.01 mg/kg of 1:10,000 IV/IO (maximum dose 0.1 mg) (1.0 ml), if low systolic BP and severe respiratory distress. May repeat every 1-2 minutes to Broselow Tape systolic BP target or improved ventilation.