

Protocol 700-M2

Allergic Reaction/Anaphylaxis

Rev: 2/18

### BLS Treatment

- ❖ Treat life threats. (See Procedure 701 *Life Threats*)
- ❖ Moderate to Severe Reaction
  - Symptoms:
    - swelling of mucous membranes of the mouth or eyes, and/or respiratory distress
  - **Epinephrine** Auto-injector (See Procedure 715 *Epinephrine Auto-Injector*)
- ❖ Prepare for transport/transfer of care.

### ALS Treatment

- ❖ Mild Reaction
  - Symptoms
    - urticaria, itching, raised welts
  - **Benadryl** 1mg/kg IM up to 50mg.
  - Transport/Contact Base Station.
- ❖ Moderate to Severe Reaction
  - Symptoms:
    - swelling of mucous membranes of the mouth or eyes, and/or respiratory distress
  - **Epinephrine** 1:1,000, 0.3mg IM, repeat every 5 minutes as needed.
  - **Benadryl** 1mg/kg IM/ IVP/ IO up to 50mg.
  - If Bronchospasm or wheezes are present, administer **Albuterol** 5mg via nebulizer, may repeat as needed. If heart rate > 160 bpm, withhold **Albuterol** and contact Base Station.
  - Transport/Contact Base Station.
  - Profound shock: **Epinephrine** 1:10,000, 0.1 mg very slow IVP/IO at no more than 0.1mg/minute. Use **Epinephrine** 1:10,000 only. Obtain Base Physician order whenever possible but do not delay care if any unusual delay.
  - If persistent hypotension
    - Consider push dose **Epinephrine** 5 mcg IV/IO q 3 mins prn (See Protocol 700 M9 *Shock*)

### Special Considerations

- ❖ **Warning** The #1 cause of sudden death from severe anaphylaxis is upper airway obstruction secondary to laryngeal edema. Aggressive treatment and airway management is critical in these instances.



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