



MIAMI TOWNSHIP FIRE & EMS CLERMONT COUNTY, OHIO *MEDICAL PROTOCOLS*



ANAPHYLAXIS/ALLERGIC REACTION

Historical Findings

1. Exposure to an allergen (insect sting, medications, foods, or chemicals).
2. Patient complains of itching, shortness of breath, tightness in chest or throat, weakness, or nausea.

Physical Findings (One or More)

1. Flushing, hives, or swelling.
2. Wheezing or stridor.
3. Anxiety or restlessness.
4. Pulse > 100 beats/minute (adult).
5. Blood pressure < 90 mmHg systolic in an adult,
 - A. < 85 mmHg systolic in a child age 5-10 years old.
 - B. < 75 mmHg systolic in a child < 5 years old.

Protocol

1. Initiate contact; reassure, and explain procedures.
2. Assess and secure the patient's airway and provide oxygen per the airway, oxygen and ventilation protocol.
3. Perform patient assessment, obtain vital signs and begin cardiac monitoring.
 - A. Remove allergen (stinger from skin, etc.)
4. Initiate IV access with a saline lock or 0.9% normal saline KVO.
 - A. If the patient is hypotensive administer a 1 liter 0.9 % normal saline bolus.
 - B. Pediatric patients < 14 years of age should receive 20 cc/kg bolus of 0.9 % normal saline.
5. Administer epinephrine 1:1000, 0.3 mg SQ/IM (pediatric 0.01 ml/kg) only if age ≤ 40 and hypotension or severe respiratory distress is present.
6. If bronchospasm (wheezing) is present, administer albuterol (proventil) aerosol treatment 2.5 mg in 3.0 ml normal saline via hand held nebulizer.



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7. Unless reaction is mild (i.e., limited to a few hives or rash), administer diphenhydramine (benadryl) 25-50 mg (pediatric over age 9 months: 1 mg/kg) IV. Diphenhydramine (benadryl) may be given IM if IV access is not available.
8. Contact medical command for consideration of methylprednisolone (solu-medrol) 125 mg slow IV for patients ≥ 18 . For patients <18 , dosage is 2 mg/kg to a maximum dose of 80 mg IV.
9. If the patient remains hypotensive with a systolic < 60 mmHg despite initial epinephrine and fluid bolus, contact medical command for the following orders:
 - A. Epinephrine 1:10,000, 0.1 mg slow IV (pediatric: 0.1 ml/kg of 1:10,000 solution)
 - B. Dopamine (intropin) infusion at 5 micrograms/kg/minute.
10. If the patient is on beta blockers or calcium channel blockers and not responding to treatment, administer glucagon (glucagen) 2 mg IM/IV.
11. If the patient is exhibiting signs and symptoms of a dystonic reaction, administer diphenhydramine (benadryl) 25-50 mg IM/IV (pediatric over age 9 months: 1 mg/kg).