NORTH COAST EMERGENCY SERVICES

POLICIES AND PROCEDURES

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Subject: Allergic/Anaphylactic Treatment Policy

I. Definition

- A. Mild Allergic Reaction: Urticaria (itchy, raised welts).
- B. Moderate/Severe Allergic Reaction: The presence of swelling of mucus membranes, dyspnea, wheezing, chest or throat tightness, or abdominal cramps.
- C. Anaphylaxis: Signs of shock.

II. Basic Life Support – All Providers

Note: Public Safety First-Aid and First Responders require prior authorization from their agencies AND North Coast EMS to carry and administer EpiPens)

- A. Provide General Medical Care.
- B. Assess severity of reaction:
 - 1. Mild Allergic Reaction:
 - a. Observe for development of additional symptoms and do not delay Epinephrine administration if indicated.
 - 2. Moderate/Severe Allergic Reaction:
 - a. Administer auto-injector Epinephrine 0.3 mg IM.
 - 3. Anaphylaxis:
 - a. Administer auto-injector Epinephrine 0.3 mg IM.
 - (1) May repeat once after 10 minutes if symptoms persist.

(1) Thay repeat once after 10 minutes it by improving persons		
III. Advanced Life Support		
Adult	Pediatric (less than 14 years of age)	
A. Mild Allergic Reaction:	A. Mild Allergic Reaction:	
1. Administer Diphenhydramine 50 mg IM.	Administer Diphenhydramine per	
B. Moderate/Severe Allergic Reaction:	pediatric medication administration	
1. Administer 1:1,000 Epinephrine 0.3 mg IM.	guide.	
a. May repeat once after 10 minutes if	B. Moderate/Severe Allergic Reaction:	
symptoms persist.	1. Administer 1:1,000 Epinephrine IM per	
2. For bronchospasm refer to refer to <i>treatment</i>	pediatric medication administration	
guideline Respiratory Distress:	guide.	
a. Administer Albuterol 5 mg in 6	a. Max initial dose 0.3 mg.	
ml nebulized.	b. May repeat once after 10	
(1) May repeat Albuterol as indicated.	minutes if symptoms persist.	
b. Administer Atrovent 0.5 mg in 6 ml	2. For bronchospasm:	
NS nebulized.	a. Administer Albuterol per	
(1) Do not repeat.	pediatric medication	
c. Administer Diphenhydramine 50	administration guide.	
mg IV/IM.	(1) May repeat Albuterol as	
	indicated.	
	b. Administer Atrovent per pediatric	
	medication administration guide.	
	(1) Do not repeat.	
	3. Administer Diphenhydramine per	
	pediatric medication	
	administration guide.	
	a. Max dose 50 mg.	

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Subject: Allergic/Anaphylactic Treatment Policy

A. Anaphylaxis:

- 1. Administer 1:1,000 Epinephrine 0.3 mg IM.
 - a. May repeat twice at 10 minute intervals if symptoms persist.
- 2. Administer NS fluid bolus 10 ml/kg IV.
 - a. Recheck vital signs every 250 ml to ensure lung sounds remain clear.
 - b. May repeat to a max volume of 30 ml/kg.
- 3. Administer Benadryl 50 mg IV.
- 4. If unresponsive and severely hypotensive:
 - a. Prepare push-dose Epinephrine:
 - (1) Mix 1 ml of 1:10,000 Epinephrine (0.1 mg/ml) with 9 ml NS in a 10 ml syringe.
 - (2) Administer push-dose Epinephrine 1 ml IV every 1-4 minutes.
 - (a) Titrate to maintain SBP > 90 mmHg.

A. Anaphylaxis:

- 1. Administer 1:1,000 Epinephrine IM per pediatric medication administration guide.
 - a. Max initial dose 0.3 mg.
 - b. May repeat twice at 10 minute intervals if symptoms persist.
- 2. Administer NS fluid bolus 20 ml/kg IV.
 - a. May repeat once if symptoms persist.
- 3. Administer Benadryl IV per pediatric medication administration guide.
 - a. Max dose 50 mg.
- 4. If unresponsive and severely hypotensive:
 - a. Prepare push-dose Epinephrine:
 - (1) Mix 1 ml of 1:10,000 Epinephrine (0.1 mg/ml) with 9 ml NS in a 10 ml syringe.
 - (2) Administer push-dose Epinephrine 1 ml IV every 1-4 minutes.
 - (a) Titrate to maintain SBP > 90 mmHg.

IV. Special Considerations

- A. Use caution when administering repeat doses of Epinephrine in patients over 60 years of age with a significant cardiac history.
- B. Allergic and Anaphylactic reactions have a variable degree of presentation, Urticaria may not always be present.

V. Base Orders	
None	
VI. Contraindications	
A. None.	
VII. Cross Reference	
A. General Medical Care	Policy No. Draft
B. Respiratory Distress	Policy No. Draft