

Monterey County EMS System Policy



Protocol Number: EP-2
Effective Date: 7/1/2019
Review Date: 6/30/2022

ALLERGIC REACTION/ANAPHYLAXIS - PEDIATRIC

BLS CARE

Routine Medical Care

Remove the patient from the source of the reaction if possible.

If the cause of the reaction is a bee sting, remove the stinger and venom sack by scraping if the stinger is still in the patient.

Assist the patient with administration of their Epinephrine Auto-injector if available for severe symptoms.

ALS CARE

Routine Medical Care.

Mild Reaction/Allergic Reaction (i.e., hives, itchiness)

Diphenhydramine 1mg/kg IV/IM. Maximum dose 50mg.

Severe Reaction/Anaphylaxis (i.e., hives, wheezing, difficulty breathing,)

Epinephrine 1:1,000, 0.01mg/kg IM. Maximum dose 0.3mg. May repeat one (1) time in 5 minutes for continued severe reaction.

Normal Saline 20cc/kg fluid bolus IV/IO. Max bolus size 500cc. Consider repeat bolus as needed for signs of shock.

Diphenhydramine 1mg/kg IV/IM/IO. Maximum dose 50mg.

Albuterol 2.5mg via Nebulizer for bronchospasm.

Base Contact for Additional Treatment:

Epinephrine 1:10,000, 0.01mg/kg, IV/IO for severe anaphylaxis. Maximum dose 0.3mg. Give slowly. **Base contact.**

Dopamine. Start at 5-10mcg/kg/min IV/IO drip for persistent hypotension. Titrate to effect up to a maximum dose of 20mcg/kg/min. **Base contact.**