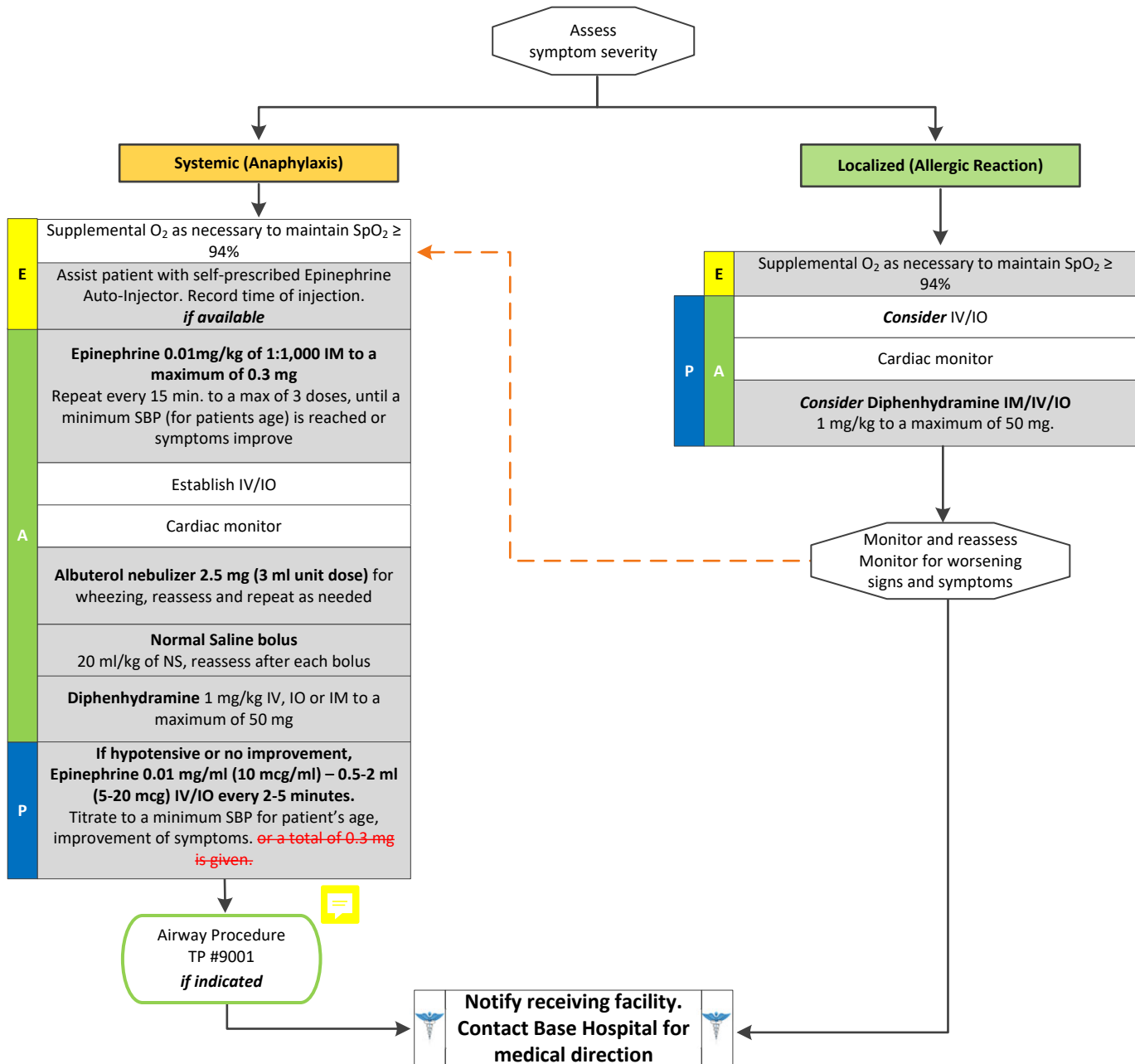




Pediatric Allergic Reaction/Anaphylaxis



DRAFT

E	EMT
A	A-EMT
P	PARAMEDIC

Treatment Protocol 9002





Pediatric Allergic Reaction/Anaphylaxis

Notes

- Anaphylaxis is an acute and potentially lethal multisystem allergic reaction.
- Epinephrine is the drug of choice and the first drug that should be administered in acute anaphylaxis reactions with moderate or severe symptoms. IM Epinephrine should be administered as priority before or during attempts at IV or IO access.
- Allergic reactions may occur with only respiratory and gastrointestinal symptoms and have no rash or skin involvement.
- The shorter the onset of symptoms from contact with an allergen, generally the more severe the reaction.
- Anaphylaxis unresponsive to repeat doses of IM Epinephrine may require IV Epinephrine administration.

Note: EMTs who have received Epi autoinjector training pursuant to SCEMSA PD# 2220 – EMT Scope of Practice, or possesses a CAEMSA Epinephrine Certification may administer an autoinjector that is not specifically prescribed to the patient.

Rebound anaphylaxis:

Patients who have received epinephrine may experience rebound anaphylaxis symptoms after initial improvement. Transport to hospital for further evaluation/monitoring should be strongly encouraged.

Cross Reference:

PD# 2220 – EMT Scope of Practice

PD# 8837 – Pediatric Airway Management

PD# 8829 – Noninvasive Ventilation (NIV)

