Anaphylaxis/Allergic Reaction

1. Follow General Pre-hospital Care Protocol.
2. Determine substance or source of exposure, remove patient from source if known and able.
3. In cases of severe allergic reaction, wheezing or hypotension, administer Epinephrine 1mg/mL.
   a. Assist the patient in administration of their own epinephrine auto-injector, if available.
   b. Adult Epinephrine auto-injector OR 0.3 mg (0.3 mL) of Epinephrine 1 mg/mL IM.

- MCA Approval of Epinephrine auto-injector for select MFR Agencies:
  ✅ YES  ☐ NO

- MCA Approval of OCMCA Epi-Kits for select MFR/BLS licensed units:
  ✅ YES  ☐ NO

   i. If child weighs less than 10 kg (approx. 20 lbs.), contact medical control prior to Epinephrine.
   ii. If child weighs between 10-30 kg (approx. 60 lbs.); administer 0.15 mg (0.15 mL) of Epinephrine 1 mg/mL IM OR via Pediatric Epinephrine auto-injector.
   iii. Child weighing greater than 30 kg; administer 0.3 mg (0.3 mL) of Epinephrine 1 mg/mL IM OR via Epinephrine auto-Injector.
   iv. May repeat at 3-5 minute intervals if the patient remains hypotensive, if available.

4. Albuterol may be indicated. Refer to Nebulized Bronchodilators Procedure.

5. Administer a Normal Saline IV/IO fluid bolus.
   a. The standard NS IV/IO fluid bolus volume will be up to 1 liter, wide open, repeated as necessary, unless otherwise noted by protocol. IV/IO fluid bolus is contraindicated with pulmonary edema.
   b. Fluid should be slowed to TKO when SBP greater than 90 mm/Hg.
   c. For pediatrics, fluid bolus should be 20 mL/kg, and based on signs/symptoms of shock.

6. If patient is symptomatic, administer Diphenhydramine.
   a. Adult 50 mg IM or IV/IO.
   b. Pediatric 1 mg/kg IM/IV/IO (maximum dose 50 mg).

7. Per MCA selection, administer bronchodilator per Nebulized Bronchodilators Procedure.
8. Per MCA Selection, administer Prednisone OR methylprednisolone.

- Medication Options:
  ✅ Prednisone 50 mg tablet PO
  (Children > 6 y/o)

  ✅ Methylprednisolone
  Adult 125 mg IV/IO/IM or
  Pediatric 2 mg/kg IV/IO/IM (max 125 mg)
9. For MCA with both selected, Prednisone PO is the preferred medication. Methylprednisolone is secondary and reserved for when a PO route is inappropriate.

10. If patient remains hypotensive after treatment, refer to **Shock Protocol**.

11. If patient is symptomatic after treatment without hypotension.

   a. Additional epinephrine via auto-injector OR additional 0.3 mg (0.3 mL) of Epinephrine 1 mg/mL IM.

*MCA approval required for MFR auto-injector use.*