



## PEDIATRIC ALLERGIC REACTION / ANAPHYLAXIS

Anaphylaxis is an acute allergic reaction characterized by varying degrees of respiratory distress, hypotension, wheezing, hives, non-traumatic edema, and tachycardia. It may be precipitated by a bite or sting or from exposure to certain drugs or allergens. Respiratory Distress is categorized as follows:

- **Minimal Distress:** A slight increase in work of breathing with no wheezing or stridor evident.
  - **Moderate Distress:** A considerable increase in work of breathing with wheezing and/or abnormal breath sounds evident.
  - **Severe Distress:** Extreme work of breathing (retractions) with a decreased LOC.
- A. Perform **Initial Treatment / Universal Patient Care Protocol** and follow the proper protocol for medical management based on clinical presentation.
- B. If reaction is secondary to a sting, remove injection mechanism, if present.
- C. If patient is in minimal distress with hives or itching but no or minimal respiratory distress (no wheezing or stridor):
1. Reassess for improvement or worsening of reaction.
  2. Transport without delay and contact **Medical Command**.
- D. If patient is in moderate distress with severe hives and/or moderate respiratory distress (wheezing), contact **Medical Command**:
1. Patient has prescribed **Epinephrine** auto-injector (EpiPen® or EpiPen JR®):
    - a. Has patient taken dose?

b. Administer pre-loaded **Epinephrine** (EpiPen®) **per Medical Command**. 
    2. No prescribed **Epinephrine** auto-injector (EpiPen® or EpiPen JR®):

a. Pediatric < 30 kg: Administer pre-loaded **Epinephrine** (EpiPen JR®) or administer **Epinephrine** 0.3 mg IM injection **per Medical Command**. 
    3. Expedite transport if not already in transport.
    4. Reassess and contact **Medical Command**.

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5. If the patient is still wheezing, administer **Albuterol** 2.5 mg with oxygen 8-10 LPM **per MCP order**.
  6. If patient is still in moderate distress, consider repeating **Epinephrine** one time **per MCP order**.
  7. Further treatment **per order of Medical Command and MCP**.
  8. Reassess and expedite transport.
- E. If shock continues, treat per **Pediatric Shock Protocol 6402**.



**Note:**

1. If the patient only has hives and no respiratory distress or shock, **Epinephrine** is not indicated.