Anaphylaxis/Allergic Reaction

Pre-Medical Control

MFR/EMT/SPECIALIST/PARAMEDIC

1. Follow **General Pre-hospital Care Protocol**.
2. Determine substance or source of exposure, remove patient from source if known and able.
3. Assist the patient in administration of their own epinephrine auto-injector, if available.

EMT/SPECIALIST

4. In cases of severe allergic reaction, wheezing or hypotension, administer epinephrine via auto-injector.

PARAMEDIC

5. If patient is symptomatic, administer diphenhydramine 50 mg IM or IV/IO.
6. In cases of severe allergic reaction, wheezing or hypotension:
   A. Administer Epinephrine 1:1000, 0.3 mg (0.3 ml) IM.
7. In cases of profound anaphylactic shock (near cardiac arrest):
   A. Administer Epinephrine 1:10,000, 0.3 mg (3 ml) slow IV/IO.

Bronchodilator Options

☐ Albuterol 2.5 mg/3 ml NS nebulized

OR

☑ Albuterol 2.5 mg/3 ml NS & Ipratropium 500 mcg nebulized

Medication Options:

Prednisone
50 mg tablet PO

☑ YES ☐ NO

Methylprednisolone
125 mg IV

☑ YES ☐ NO

8. Per MCA selection, administer Albuterol nebulized **OR** Albuterol and Ipratropium nebulized if wheezing or airway constriction.
9. Administer additional Albuterol 2.5 mg/3 ml NS nebulized, as needed, if wheezing or airway constriction persists.
10. Per MCA Selection, if a second nebulized treatment is needed, administer Prednisone **OR** Methylprednisolone.

Post-Medical Control:

EMT/SPECIALIST

1. Additional Epinephrine via auto-injector.

PARAMEDIC

2. Additional Epinephrine 1:1,000, 0.3 mg (0.3 ml) IM; Epinephrine 1:10,000 0.3 mg (3ml) slow IV/IO.