## 2.02 ALLERGIC REACTION

### BLS Treatment – ALL Allergic Reactions

- Position of comfort.
- NPO
- **Oxygen** as indicated.
- May help patient administer their personal EpiPen autoinjector or equivalent product.
- If patient does not have a personal autoinjector, give IM EpiPen autoinjector or equivalent product for suspected anaphylaxis and/or severe asthma if EMT has been trained.

### ALS Treatment - SPECIFIC Allergic Reactions

#### MILD ALLERGIC REACTION
Hives, rash and/or itching

- **Diphenhydramine**

#### ANAPHYLAXIS (SYSTEM REACTION) WITHOUT SHOCK
Normal blood pressure with any 2 body systems involved, such as: hives, rash, wheezing, cough, chest tightness, stridor, grunting, swallowing difficulty and/or throat tightness, lip/facial swelling, anxiousness, abdominal cramping, nausea/vomiting.

- **IM Epinephrine** (see Notes prior to administering)
- Establish IV/IO **Normal Saline TKO**
- **Diphenhydramine**
- **Albuterol**
- **IM Epinephrine** if symptoms are refractory to above interventions (see Notes prior to administering)

#### ANAPHYLAXIS WITH SHOCK
Low blood pressure with signs of hypoperfusion, such as: altered mental status, agitation, restlessness, somnolence, poor skin signs (pale, cool, diaphoretic, and/or cyanotic), low SPO2, delayed or poor capillary refill.

- **Epinephrine** (see Notes prior to administering)
- **IV/IO Normal Saline** bolus
- **Same treatments as anaphylaxis without shock but if no response to IM Epinephrine and fluid bolus, administer IV/IO Epinephrine.**
- **Diphenhydramine**
- **Albuterol**

#### Notes

- Epinephrine IV in patients > 40 years old is associated with a high risk of adverse cardiovascular events. In these patients, utilize all other measures first.