

Pediatric: Anaphylaxis

EMR

- ABC and vital signs
- Airway management with **oxygen** therapy maintaining a SaO₂ of 94-98% through titration
- **Epi Pen Jr.** if the patient has hypotension and / or respiratory distress with airway swelling, hoarseness, stridor, or wheezing.

EMR STOP

EMT

- Cardiac Monitor
- Implement BLS Epi-Pen Procedural Protocol
- If agency is trained, administer ***Epinephrine** 1:1,000 IM 0.15mg IM
- Consider administration of 1 mg/kg or by pediatric tape of ***Diphenhydramine** oral solution, max dose 25mg. Only if patient can safely swallow.
- If continued wheezing or shortness of breath consider **Albuterol** less than 1year; 1.25 mg, more than 1 year; 2.5 mg via nebulizer

EMT STOP

EMT IV

- Vascular access

EMT IV

ADVANCED EMT

- ***Diphenhydramine (Benadryl)** 1 mg/kg IV or IM; max dose 25 mg
- **Epinephrine** 1:1,000 dose 0.01 mg/kg (0.01 ml/kg) subcutaneously; max 0.5 mg (0.5 ml)

ADVANCED EMT STOP

Key Points/Considerations

- If an EMT has administered an Epinephrine, or the patient has administered their own epinephrine auto injector, contact Medical Control prior to administering additional epinephrine subcutaneously