

County of Santa Cruz

HEALTH SERVICES AGENCY

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EMERGENCY MEDICAL SERVICES PROGRAM

Protocol No. M2-P Reviewed January 2008

Emergency Medical Services Program

Approved

Suchad

Medical Director

Subject: ACUTE ALLERGIC REACTION

I. BLS Treatment Protocol:

- A. Treat life threats. (See Policy 4000)
- B. Prepare for transport / transfer of care.

II. ALS Treatment Protocol:

- A. Mild Reaction
 - 1. Treat life threats. (See Policy 4000)
 - 2. Transport.
 - 3. Contact Base Station.
- B. Moderate to Severe Reaction (urticaria, itching, raised welts, swelling of mucous membranes of the mouth or eyes, and/or respiratory distress)
 - 1. Treat life threats. (See Policy 4000)
 - 2. Transport.
 - 3. Epinephrine 0.01 mg/kg of 1:1000 IM. May repeat x2, to a maximum of 0.3 ml.
 - 4. Benadryl 1mg/kg IM/IV/IO to a maximum of 50 mg.
 - 5. If symptomatic hypotension, administer 20 cc/kg fluid bolus.
 - 6. If Bronchospasm or wheezes are present:

Albuterol 2.5mg via nebulizer, may repeat X3 q 10 minutes. If heart rate > 180 bpm withhold treatment and contact Base Station.

- 7. Contact Base Station for further orders.
- In cases of anaphylactic shock: Epinephrine 0.01 mg/kg slow IVP/IO at no more than 0.1mg/minute. Use epinephrine 1:10,000 only. <u>This order is by Base Station MD only.</u>

Note: The #1 cause of sudden death from severe anaphylaxis is upper airway obstruction secondary to laryngeal edema. Aggressive treatment and airway management is critical in these instances.