

Anaphylaxis

Definition:

Allergic reaction **involving ≥ 2 body systems**

Example:

- DERM -> rash, pruritus, flushing, swollen lips/tongue
- RESP -> wheeze, nasal congestion, throat tightness, stridor
- CARDIO -> light-headedness, syncope, palpitations, tachycardia
- GI -> vomiting/diarrhea

Management:

- Ask your MOA to **call 911**
- Remove allergic trigger, if present
- **First medication:**
 - Administer IM Epinephrine (don't delay Epi for adjunct medications); see chart on the right for dosing
 - Administer additional doses every 5 mins, as needed
- **Any patient who receives Epi should be sent to the ED for observation** (due to risk of cardiac arrhythmia or worsening allergic symptoms)
- **Secondary medications:**
 - Supplemental oxygen, if available
 - Ventolin 100 mcg MDI: 6 puffs q 20 mins, as needed
 - Diphenhydramine
 - Infant/Child: 1 mg/kg (max 50 mg) PO/IM
 - Adult: 50 mg PO/IM
 - Loratadine/Famotidine/Cetirizine

IM Epinephrine Dosage Chart

Weight (kg)	Epinephrine Dose (1 mg/ml) amp
5-10	0.1 mg
11-15	0.15 mg
16-20	0.2 mg
21-25	0.25 mg
26-30	0.3 mg
31-35	0.35 mg
36-40	0.4 mg
41-45	0.45 mg
≥ 46	0.5 mg

Source: [adapted from Trekk](#)

In the ED:

- Steroids and adjunctive medications will be administered, PRN

Resources

- [How to use an EpiPen](#)
- [Trekk guidelines for anaphylaxis](#)
- [Anaphylaxis pocket card](#)
- [Anaphylaxis in kids](#)

