

TIP: ANAPHYLAXIS



Your MOA has just fit in an 8-year-old patient and her parents, stating that the child appears anxious with very swollen lips and eyes. When you see her, you note wheals and redness on her neck and chest. You are certain she is having an allergic reaction and are now on high alert for anaphylaxis. She complains that her tongue feels tingly and she is having some difficulty breathing.

TIP: Prepare Ahead!

This is when you jump into action and quickly grab the emergency kit you have prepared for events just like this. Ask your MOA to call 911.

- Remove allergic trigger if present
- Place patient supine (unless vomiting). Don't let patient walk or stand
- With your airway support equipment at the ready, give epinephrine 0.15 mg (for kids up to 20kg/44 lbs) intramuscularly into the thigh. Dosing for kids over 20kg and adults is 0.3 mg IM; consider smaller dosing for frail elderly or high CV risk patients. Watch for signs of improvement and redose in 5 minutes if worsening.

TRICK: You did it!

While your patient is improving and you are waiting for the ambulance to arrive to transfer your patient to the ED for observation, prepare and discuss a prescription for 2 EpiPens to have available for immediate use if this situation occurs again. It's a good idea to have a practice kit in your office to let patients see and feel how to use it. **Free kits** are easily ordered at: <https://www.epipen.ca/order-your-free-epipen-essential>

Book a follow-up appointment to review the proper use of the EpiPen and explore what allergen may have precipitated this event.

Here is a video demonstration that will help you teach your patient and her parents how to use an EpiPen: <https://www.youtube.com/watch?v=uBvdO9a9NTQ&t=19s>