

	Department Name Address	ILS	EMT/Intermediate
		Revision #	
		Implementation Date	
Protocol	3.2.21 Allergic Reaction - Pediatric	Last Reviewed/Update Date	
Author / Owner		Medical Director	

Treatment goals of the patient with a severe allergic reaction in the pre-hospital environment include treatment of the local and systemic reactions, ensuring adequate oxygenation, administration of epinephrine, advanced life support when appropriate, and safe timely transport to the appropriate care facility. Be prepared to manage systemic airway complications and anaphylactic shock.

1. Baseline care standards.
2. Maintain a calm approach to both parent and child.
3. Allow the child to assume and maintain a position of comfort or to be held by parent, preferably in an upright position.
4. Administer high concentration of oxygen.
5. If an injection site, treat local reaction with ice.
6. Request an advanced life support intercept at first sign of systemic reaction.
7. Continuously reassess airway, breathing and circulation status.
8. If the patient shows signs of breathing distress, increased heart rate, swollen lips and tongue, and increased hives, administer Epinephrine auto-injector pediatric dose (0.15mg).
9. Establish IV access at a TKO rate for normal blood pressure. IV fluid bolus of 20ml/kg for hypotension over 5-20 minutes. Reassess; repeat if necessary.
10. Treat for shock and be prepared to initiate CPR and AED as necessary during transport.
11. Continue transport / intercept without delay.
12. If the patient's condition shows signs of increasing distress, repeat pre-loaded auto injectable Epinephrine (0.15mg) every 5-10 minutes.

13. Perform orotracheal intubation and advanced airway management on unresponsive patient.

- May use adult auto injector pen for children over 70 pounds.

Medical Director's Signature

Date

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