

8.01 PEDIATRIC ALLERGIC REACTION / ANAPHYLAXIS

EMSAC May 2023

<p style="text-align: center;">BLS Treatment –Allergic Reactions</p> <p>May help patient administer their personal EpiPen autoinjector or equivalent product</p> <ul style="list-style-type: none">• Position of comfort• NPO• Oxygen as indicated• If patient does not have a personal autoinjector, give IM EpiPen autoinjector or equivalent product for suspected anaphylaxis and/or severe asthma if EMT has been trained.
<p style="text-align: center;">ALS Treatment</p> <p>Current American Heart Association Guidelines concerning Emergency Cardiac Care assessments and interventions shall always take precedence over local protocols when there is a conflict concerning techniques of resuscitation.</p>
<p style="text-align: center;">MILD ALLERGIC REACTION</p> <p style="text-align: center;">Hives, rash, itching.</p> <ul style="list-style-type: none">• Diphenhydramine
<p style="text-align: center;">ANAPHYLAXIS (SYSTEMIC REACTION) WITH NO SHOCK</p> <p>Normal blood pressure WITH 2 body systems involved (e.g. respiratory AND GI symptoms) such as hives, rash, wheezing, cough, chest tightness, stridor, grunting, swallowing difficulty and / or throat tightness, lip / facial swelling, anxious, abdominal cramping, nausea / vomiting (especially common in children).</p> <ul style="list-style-type: none">• (Do 1st) Epinephrine• Diphenhydramine• Albuterol

SAN FRANCISCO EMS AGENCY

Effective: XXXXXXXXXXSupersedes: 03-

01/2015