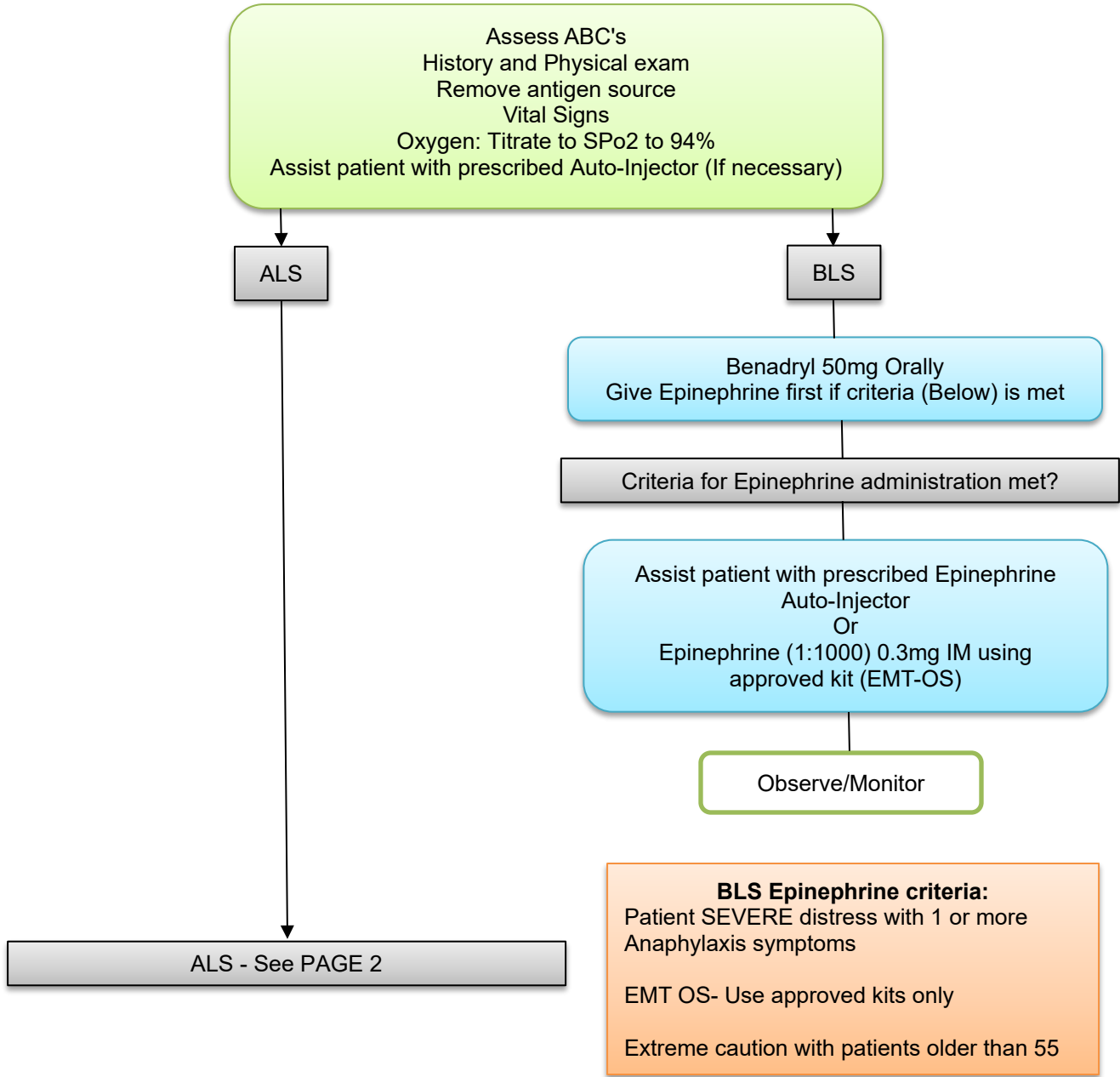
	1209	Allergic Reaction / Anaphylaxis
Nor-Cal EMS Policy & Procedure Manual	Treatment Guidelines	
Effective Date: 11/01/2022	Next Revision: 11/01/2025	
Approval: Jeffrey Kepple MD – MEDICAL DIRECTOR	SIGNATURE ON FILE	

Authority: Health and Safety Code Division 2.5, California Code of Regulations, Title 22, Division 9.



Reaction Types:

Allergic reaction: Acute onset of hives, pruritis, flushing or rash

Anaphylaxis (1) One or more of the following:
Stridor, Wheezing, Hoarseness, Airway edema or hypotension

Extremis (1) One or more of the following:
Systolic BP less than 90, airway compromise, Altered mental status

ALS

Establish IV / IO
ECG

Allergic reaction

Benadryl 50mg IV/IO/IM/PO

High risk or
severe exposure

Consider:
Epinephrine (1:1000) 0.01mg/kg IM
Max dose 0.5mg

Observe/Monitor

Anaphylaxis

Epinephrine (1:1000) 0.01mg/kg IM
Max dose 0.5mg

In Extremis?

Push Dose Epinephrine- 50mcg bolus IV/IO
May repeat Push Dose Epinephrine 5-10mcg IV/IO every 1-5 min if stridor persists or Systolic BP remains below 90
Discontinue if Chest pain or life-threatening dysrhythmia develops

Consider:
Epinephrine (1:1000) 1 mg Nebulized
And/or advanced airway

Benadryl 50mg IV/IO/IM/PO

Albuterol 5 mg with Ipratropium
500mcg Nebulized
May Repeat Albuterol 5mg

Patient on Beta Blockers with
slow response to Epinephrine
Glucagon 1mg slow IV

No