PEDIATRIC ALLERGIC REACTION
(Birth to 14 Years of Age)

FIELD ASSESSMENT /TREATMENT INDICATORS

Signs and Symptoms of an Acute Allergic Reaction
History of Exposure to Possible Allergen

BLS INTERVENTIONS

1. Recognize s/s of respiratory distress for age
2. Reduce anxiety, assist patient to assume POC
3. Oxygen administration as clinically indicated, (humidified oxygen preferred)
4. Assist patient with self-administration of prescribed Epinephrine device
5. Assist patient with self-administration of prescribed Diphenhydramine

ALS INTERVENTIONS

1. Maintain airway with appropriate adjuncts, obtain oxygen saturation on room air if possible
2. Nebulized Albuterol 2.5 mg with Atrovent may repeat times two (2)
   a. 1 Day to 12 months – Atrovent 0.25mg
   b. 1 year to 14 years – Atrovent 0.5mg
3. If no response to Albuterol and Atrovent, consider Epinephrine (1:1000) 0.01mg/kg SC not to exceed adult dosage of 0.3mg
4. For symptomatic hypotension with poor perfusion, consider fluid bolus of 20ml/kg of NS not to exceed 300ml NS and repeat as indicated.
5. Diphenhydramine 1mg/kg slow IV or 2 mg/kg IM, not to exceed adult dose of 25mg IV/IO or 50mg IM.
6. Establish additional IV access if indicated
7. For anaphylactic shock (e.g., no palpable radial pulse and a depressed level of consciousness) administer epinephrine dose 0.01mg/kg (1:10,000) IV/IO up to 0.05 mg/kg
8. Base Hospital may order additional medication dosages and additional fluid boluses

APPROVED:

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Medical Director, ICEMA Date

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Health Officer, Inyo County Date

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Health Officer, San Bernardino County Date

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Health Officer, Mono County Date

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Executive Director, ICEMA Date