



ORANGE COUNTY EMERGENCY MEDICAL SERVICES
BASE HOSPITAL TREATMENT GUIDELINES
ALLERGIC REACTION (PEDIATRIC)

BASE GUIDELINES

1. Determine ALS Standing Order treatments/procedures rendered prior to base hospital contact. Use ALS standing order as guidelines for treatments/procedures not initiated prior to base hospital contact.
2. If cardiac arrest occurs, treat using cardiac arrest standing orders (BH-P-40/SO-P-40).
3. Consider repeat Epinephrine dosing if lack of palpable pulse or no response to fluid bolus per dosing in #2 of the ALS Standing order.

ALS STANDING ORDER

1. Pulse oximetry, if oxygen saturation less than 95%:
 - ▶ *High-flow Oxygen by mask or nasal cannula (direct or blow-by) as tolerated.*
2. For further treatment, categorize allergic reaction into one of three levels described below:

Mild Allergic Reaction (rash, urticaria, stable vital signs):
→ Transport to nearest available ERC.
Moderate Allergic Reaction (facial/cervical angioedema, respiratory distress or wheezing):
 - ▶ *Epinephrine: 0.01 mg/kg IM (1 mg/mL preparation) (maximum 0.3 mg).*
 - ▶ *Diphenhydramine: 1 mg/kg IM/IV (maximum 50 mg), once*
→ If wheezing present:
 - ▶ *Albuterol, Continuous nebulization of 6 mL (5 mg) concentration as tolerated.*
→ ALS escort to nearest available ERC.

Anaphylaxis (hypotension, severe wheezing, respiratory distress, impending airway obstruction):
 - ▶ *Epinephrine: 0.01 mg/kg IM (1 mg/mL preparation) OR*
 - ▶ *Epinephrine: 0.01 mg/kg slow IV/IO (0.1 mg/mL preparation) (IV access is preferred, maximum 0.3 mg)*
 - ▶ *Diphenhydramine: 1 mg/kg IV/IO (maximum 50 mg), once*
 - ▶ *Normal Saline: 20 mL/kg IV (maximum 250 mL), may repeat twice to maintain perfusion.*
→ If wheezing present:
 - ▶ *Albuterol: continuous nebulization of 6 mL (5 mg) concentration as tolerated.*
→ ALS escort to nearest available ERC or Base Hospital Contact as needed.
3. If cardiac arrest occurs, treat using cardiac arrest standing orders (SO-P-40).

Approved: