



EMT-Basic Treatment Protocol 6501

Allergic Reaction/Anaphylaxis

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Anaphylaxis is an acute allergic reaction characterized by varying degrees of respiratory distress, hypotension, wheezing, hives, non-traumatic edema, and tachycardia. It may be precipitated by a bite or sting or from exposure to certain drugs or allergens.

- A. Perform **MAMP Protocol 6201**.
- B. If from a sting, remove injection mechanism, if present.
- C. If patient is in mild distress with hives or itching but no or minimal respiratory distress (no wheezing or stridor):
 - 1. Reassess for improvement or worsening of reaction.

2. Transport without delay and contact **Medical Command**.



- D. If patient is in moderate distress with severe hives and/or moderate respiratory distress (wheezing), contact medical command.
 - 1. Patient has prescribed Epinephrine auto-injector (EpiPen® or EpiPen JR®):
 - a. Has patient taken dose?

b. Administer pre-loaded Epinephrine (EpiPen®) **per Medical Command**.



2. No prescribed Epinephrine auto-injector (EpiPen® or EpiPenJR®):

a. Adult: Administer pre-loaded Epinephrine (EpiPen®) **per Medical Command**.

b. Pediatric < 60 lbs.: Administer pre-loaded Epinephrine (EpiPenJR®) **per Medical Command**.





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3. Expedite transport if not already in transport.
4. Reassess and contact Medical Command.

5. If patient still wheezing consider, albuterol nebulizer 2.5 mg with oxygen at 8 to 10 LPM **per order of MCP.**



6. If patient is still in moderate distress, consider repeating epinephrine one time **per MCP order.**



7. Further treatment **per order of Medical Command and MCP.**

8. Reassess and expedite transport.
9. If shock continues, treat **per Adult Shock Protocol 6108** or **Pediatric Shock Protocol 6402.**

E. Special Notes:

1. Epinephrine should be used with caution in patients greater than 65 year of age or with history of hypertension or cardiac disease.
2. If the patient only has hives and **no** respiratory distress or shock, Epinephrine is not indicated.