Monterey County EMS System Policy



Protocol Number: E-2 Effective Date: 7/1/2024 Review Date: 6/30/2027

ALLERGIC REACTION/ANAPHYLAXIS

BLS/ALS Care Routine Medical Care Oxygen if any distress Remove the patient from the source of the reaction if possible. If the cause of the reaction is a bee sting, remove the stinger and venom sack by scraping if the stinger is still in the patient. Severe Reaction/Anaphylaxis Mild Allergic Reaction (i.e., hives, wheezing, difficulty (i.e., hives, itchiness) breathing) **EPINEPHRINE DIPHENHYDRAMINE** BLS Providers: 0.3mg IM via auto-25-50mg, IV/IM injector Max dose of 50mg ALS Providers: 1:1,000, 0.3 mg IM May Repeat x 1 in 5min. (use with caution in elderly patients or patients with a history of Coronary Artery Disease) **DIPHENHYDRAMINE** 50mg IV/IM/IO Max dose of 50mg **ALBUTEROL** 5mg via nebulizer for bronchospasm Signs of **Monitor Patient** Shock? **Normal Saline Fluid Bolus** 500ml IV/IO. Transport to the most Consider repeat bolus as appropriate ED needed to maintain systolic BP >110mmHg. For SEVERE ANAPHYLAXIS **Base Hospital Contact** Epinephrine 1:10,000, 0.3mg, IV/IO slow IVP Dopamine5-10mcg/kg/min IV/IO drip for persistent hypotension. Max dose of 20mcg/kg/min