

Suffolk County Anaphylactic Reactions **With Respiratory Distress or Hypoperfusion**

Note:

**Request Advanced Life Support if available.
Do not delay transport to the appropriate hospital.**

- I. Assure that the patient's airway is open and that breathing and circulation are adequate. Suction as necessary.
- II. Administer high concentration oxygen.

Note:

In pediatric patients, maintain a calm approach to both parent and child. Allow the child to assume and maintain a position of comfort or to be held by the parent/guardian, preferably in an upright position.

- III. Determine that the patient has a diagnosed history of anaphylaxis, severe allergic reactions, **and/or** a recent exposure to an allergen or inciting agent.
- IV. If cardiac and respiratory status is normal, transport the patient while performing frequent ongoing assessments.
- V. If **either** cardiac or respiratory status are abnormal, proceed as follows:
 - A. If the patient is having severe respiratory distress **or** hypoperfusion **and** has been prescribed an epinephrine auto injector, **assist** the patient in administering the epinephrine. If the patient's auto injector is not available or is expired, and the EMS agency carries an epinephrine auto injector or REMAC approved syringe epinephrine kit*, **administer** the epinephrine as authorized by the agency's medical director (preferred to anterolateral thigh.)
 - B. If the patient has not been prescribed an epinephrine auto injector, begin transport and contact Medical Control for authorization to administer epinephrine by epinephrine auto injector or REMAC approved syringe epinephrine kit* if available to the anterolateral thigh.
- VI. Contact Medical Control for authorization for a second administration of the epinephrine auto injector or REMAC approved syringe epinephrine kit*, if needed to the anterolateral thigh.
- VII. Refer immediately to any other appropriate protocol.
- VIII. If cardiac arrest occurs, perform CPR according to AHA/ARC/NSC standards and refer to the Cardiac Arrest Protocol.

Anaphylactic Reactions, continued

- IX. Transport immediately.
- X. Ongoing assessment. Obtain and record the patient's initial vital signs, repeat enroute as often as the situation indicates. **Be alert for changes in the patient's level of consciousness.**
- XI. Record all patient care information, including the patient's medical history and all treatment provided, on a Prehospital Care Report (PCR).
- XII. If epinephrine has already been administered, continue to reassess respiratory effort and vital signs, transport immediately.

*A REMAC Approved Syringe Epinephrine Kit will at a minimum include:

- 1) A 1 mL syringe that has clearly delineated graduations for adult (0.3 mL) and pediatric (0.15 mL) dosing and is **not** compatible with a luer-lock system.
- 2) One 1 mL vial of 1:1000 epinephrine.
- 3) An appropriate safety needle for intramuscular injection.
- 4) A checklist outlining the steps required to administer syringe epinephrine.

Any kits will require approval by the Suffolk County REMAC or authorized individuals.