

- Wheezing or stridor
- Itching, flushing, urticarial, angioedema
- Syncope, bradycardia, dysrhythmia, or hypotension
- Anxiety, confusion, sense of impending doom

## Drug Alert

### Emergency Management of Anaphylaxis

**Drug:** Epinephrine 0.01 mg/kg up to maximum of 0.5 mg

**Dosage:** EpiPen Jr 0.15 mg intramuscularly (IM) for child weighing 8 to 25 kg (17.5 to 55 pounds)

EpiPen 0.3 mg IM for child weighing 25 kg (55 pounds) or more

**Observe for adverse reactions:** Tachycardia, hypertension, irritability, headache, nausea, and tremors

Data from Sampson HA, Wang J, Sicherer SH: Anaphylaxis. In Kliegman RM, Stanton BF, St. Geme JW, et al, editors: *Nelson textbook of pediatrics*, ed 20, Philadelphia, 2016, Saunders/Elsevier.

## Diagnosis and Therapeutic Management

The diagnosis of food allergy is made based on a number of factors, including the occurrence of anaphylaxis or any combination of 37 symptoms listed in the National Institute of Allergy and Infectious Diseases guidelines within minutes to hours of ingesting food or if such symptoms have occurred after the ingestion of a specific food on one or more occasions. The gold standard is the double-blind, placebo-controlled food challenge; the skin prick test and serum IgE measurements may be used as an adjunct to diagnose food allergy but singly should not be used for the diagnosis. The atopy patch test, intradermal test, and serum IgE test are not recommended for establishing a diagnosis. A single oral food challenge may be used