



3. Contrary to common belief that all cases of anaphylaxis present with cutaneous manifestations, such as urticaria or mucocutaneous swelling, a significant portion of anaphylactic episodes may not involve these signs and symptoms on initial presentation. Moreover, most fatal reactions to food-induced anaphylaxis in children were not associated with cutaneous manifestations
4. A thorough assessment and a high index of suspicion are required for all potential allergic reaction patients – consider:
 - a. History of Present Illness
 - i. Onset and location
 - ii. Insect sting or bite
 - iii. Food allergy/exposure
 - iv. New clothing, soap, detergent
 - v. Past history of reactions
 - vi. Medication history
 - b. Signs and Symptoms
 - i. Itching or urticaria
 - ii. Coughing, wheezing, or respiratory distress
 - iii. Chest tightness or throat constriction
 - iv. Hypotension or shock
 - v. Persistent gastrointestinal symptoms (nausea, vomiting, and diarrhea)
 - vi. Altered mental status (AMS)
 - c. Other Considerations
 - i. Angioedema (drug-induced)
 - ii. Aspiration/airway obstruction
 - iii. Vasovagal event
 - iv. Asthma or chronic obstructive pulmonary disease (COPD)
 - v. Heart failure
5. Gastrointestinal symptoms occur most commonly in food-induced anaphylaxis, but can occur with other causes
 - a. Oral pruritus is often the first symptom observed in patients experiencing food-induced anaphylaxis
 - b. Abdominal cramping is also common, but nausea, vomiting, and diarrhea are frequently observed as well
6. Patients with asthma are at high-risk for a severe allergic reaction
7. There is no proven benefit to using steroids in the management of allergic reactions and/or anaphylaxis
8. There is controversy among experts with very low-quality evidence to guide management for the use of empiric IM epinephrine after exposure to a known allergen in asymptomatic patients with a history of prior anaphylaxis

Pertinent Assessment Findings

1. Presence or absence of angioedema
2. Presence or absence of respiratory compromise
3. Presence or absence of circulatory compromise
4. Localized or generalized urticaria
5. Response to therapy