

**San Joaquin County
Emergency Medical Services Agency****BLS Allergic Reaction - Anaphylaxis**

AUTHORITY: Health and Safety Code, Division 2.5, Sections 1797.60, 1797.80, 1797.197, 1797.197a, 1797.204, 1797.220, 1798; California Code of Regulations, Title 22, Chapter 2, Sections 100062, 100063, 100064

INFORMATION NEEDED:

History of exposure to allergen, such as, but not limited to: bee/wasp stings, drugs or medication, nuts, seafood, new food consumed (especially infants), prior allergic reactions.

OBJECTIVE FINDINGS:

- Mild: Hives, rash, itching, anxiety.
Moderate: Hives, rash, bronchospasm, wheezing, nausea.
Severe: Respiratory distress, chest tightness, difficulty swallowing, altered mental status, signs of shock.

TREATMENT:

1. Primary Survey – ensure ABC's.
2. Remove patient from contact with allergen and environment if warranted.
3. Confirm ALS transport is responding.
4. For moderate to severe reactions:
 - a. Assist patient with taking their own prescribed anaphylaxis medications such as bee sting kit (epinephrine, diphenhydramine, antihistamine) or beta-2 inhaler.
 - b. Enhanced Skills EMT: Administer Epinephrine Auto-Injector in lateral thigh:
 - i. Contraindications: Chest pain or history of prior myocardial infarction.
 - ii. Dose:
 1. Adult dose (greater than 66 lbs and less than 66 years old) EpiPen Auto-Injector 0.3mg. Do not repeat dose.
 2. Pediatric dose (less than 66 lbs greater than 6 months of age) Epipen Jr. Auto-Injector 0.15mg. Do not repeat dose.
5. Monitor SpO₂.
6. Administer oxygen for shortness of breath or signs of hypoxia: Oxygen 10-15 L/min via non-rebreathing mask. A patient with ineffective respirations: support ventilations with BVM and appropriate airway adjunct.
7. Secondary Survey and Routine Medical Care.
8. Treat for shock as appropriate.