

Policy on Anaphylaxis In The Non-hospital Setting

In the event of an anaphylactic reaction **the priority is prompt administration of adrenalin.** In any situation where immunization or other injection of biological products is to occur, adrenalin and diphenhydramine HCl (Benadryl ®) must be on hand for use in the event of an anaphylactic reaction. The appropriate dose of adrenalin and benadryl for the individual is to be noted before the procedure begins. The initial management of a person with anaphylaxis is to be followed, as outlined with steps 1- 3 being done rapidly or simultaneously:

PROCEDURE:

1. Call for assistance for transport to emergency setting (or have someone call).
2. Place person in recumbent position with legs elevated.
3. Establish an airway to initiate **Cardio Pulmonary Resuscitation (CPR)**, if necessary.
4. **Promptly administer adrenalin** subcutaneously or intramuscularly*, in the limb opposite the site of injection. Use the arm if both legs have been used as injection sites during the current visit. The appropriate dose is:

Table 1.8-2: Adrenalin Dose By Age

AGE	DOSE (1:1000 adrenalin)
2-6 MONTHS	0.07 mL
7 MONTHS TO 11 MONTHS	Between 0.07 mL. and 0.10 mL
12 TO 17 MONTHS	0.10 mL
18 MONTHS TO 4 YEARS	0.15 mL
5 YEARS	0.20 mL
6-9 YEARS	0.30 mL
10-13 YEARS	0.40 mL
14 YEARS AND OLDER	0.50 mL

5. Administer **Benadryl** (Diphenhydramine Hcl), inject **Intramuscularly**.
6. Dosing with Adrenalin* can be repeated at 20 minute intervals, if necessary. May be repeated twice for a total of 3 doses.
7. As an adjunct to adrenalin, a dose of diphenhydramine HCl (Benadryl ®) can be given. It is usually reserved for patients not responding to adrenalin or when transfer to an acute care setting cannot be effected within 30 minutes. Oral treatment is preferred for conscious patients who are not seriously ill because Benadryl ® given deep intramuscularly is painful. If given intramuscularly it should be in a site that has not been used for immunization. A single dose will give effects for several hours,

therefore only one dose is required. Benadryl should not be repeated.
Doses for injection are shown in Table 1.8-3.

* Speedy intervention with adrenalin is of paramount importance; failure to use adrenalin promptly is more dangerous than using it improperly

Table 1.8-3: BENADRYL ® for INTRAMUSCULAR injection (50mg/mL solution)

AGE	AMOUNT (mL)	DOSE (mg.) I/M
< 2 years	0.25 mL	12.5 mg
2 - 4 years	0.50 mL	25 mg
5 - 11 years	1.00 mL	50 mg
> 12 years	2.00 mL	100 mg

A poster summarizing actions for response to anaphylaxis is available for clinic areas (appendix B)

NOTE: In the event of an anaphylactic type reaction all events must be charted and the nursing supervisor and Communicable Disease Nurse/Coordinator should be notified as soon as possible.