

# ALLERGIC REACTION ADMINISTRATIVE ORDER

**Initiate immediate supportive care:**

O2 to maintain sat  $\geq$ 94%  
 Complete primary and secondary survey as indicated  
 Vital Signs (FSBG and temperature as indicated)  
 Cardiac Monitor as indicated

**Stable**  
 Urticaria (Hives),  
 Itchy,  
 Wheezing

**Unstable**  
 Respiratory distress  
 Angioedema/stridor  
 Signs of shock and/or hypotension (SBP < 90)  
 Severe abdominal pain, tachycardia

	MANAGE AIRWAY
Consider <i>Albuterol and Atrovent SVN</i> May repeat <i>Albuterol</i> only q5 minutes, max 3 doses	<i>Epi 0.01mg/kg</i> (of 1mg/ml) up to max 0.5mg IM May repeat for patients in extremis q5min as needed
Consider <b>Initiating IV NS TKO</b> If hypotensive, administer NS 20ml/kg bolus Reassess VS and lung sounds after every 500ml infused May repeat as needed for continued hypotension	<i>Albuterol and Atrovent SVN</i> May repeat <i>Albuterol</i> only q5 minutes, max 3 doses
Consider <i>Diphenhydramine (Benadryl)</i> 1mg/kg IV up to 50mg	<b>Initiate IV NS TKO</b> If hypotensive, administer NS 20ml/kg bolus Reassess VS and lung sounds after every 500ml infused May repeat as needed for continued hypotension
Consider <i>Methylprednisolone (Solumedrol)</i> 2mg/kg IV, up to 125mg total	<i>Diphenhydramine (Benadryl)</i> 1mg/kg IVP, up to 50mg
	<i>Methylprednisolone (Solumedrol)</i> 2mg/kg IV, up to 125mg total

**Notification to include:**

Allergic Reaction Administrative Order, unit number, patient age, gender, and ETA to receiving facility.  
 Advise if patient is unstable.