

# 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) (max 0.5mg) IM If no improvement, MR q5min as needed with max of 3 doses
Consider <b>Initiating IV NS/LR TKO</b> If normotensive, consider saline lock with NS flush <i>Push all meds slowly</i> If hypotensive, administer NS/LR 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 (max 50mg) IV/IM	<b>Initiate IV NS/LR TKO</b> If normotensive, consider saline lock with NS flush <i>Push all meds slowly</i> If hypotensive, administer NS/LR 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 (max 125mg) IV	<i>Diphenhydramine (Benadryl)</i> 1mg/kg (max 50mg) IV May administer IM if no IV access
	<i>Methylprednisolone (Solumedrol)</i> 2mg/kg (max 125mg) IV

**Notification to include:**

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