ALS STANDING ORDERS:
Allergic reactions may be mild to life threatening (termed anaphylaxis), treat in field based on the following assessment findings:

Reaction with only rash or urticaria and vital signs stable:
→ Pulse oximetry, if room air oxygen saturation 95% - 100%, transport to nearest ERC.

Reaction includes facial/cervical angioedema:
► Epinephrine 0.5 mg IM lateral thigh area (1 mg/1 mL concentration) – one time dose, hold if history of cardiac disease.

→ Pulse oximetry; if room air oxygen saturation less than 95%:
► Oxygen by mask or nasal cannula (for nasal cannula provide 6 l/min flow rate as tolerated).
► Diphenhydramine (Benadryl®) 50 mg IM or IV once.
→ ALS escort to nearest appropriate ERC.

Reaction includes wheezing or hypoxia (pulse oximetry < 95% saturation):
► Oxygen by mask (high flow) or nasal cannula (6 l/min flow rate) as tolerated.
► Epinephrine 0.5 mg IM lateral thigh (1 mg/1mL concentration), may repeat twice with 0.5 mg IM every 10 minutes for continued symptoms.
► Albuterol, Continuous nebulization of 6.0 mL (5 mg) concentration as tolerated.
► Diphenhydramine (Benadryl®) 50 mg IM or IV once.
→ ALS escort to nearest appropriate ERC.

Reaction includes hypotension, respiratory distress, impending airway obstruction:
► Epinephrine 0.5 mg IM lateral thigh (1 mg/1mL concentration)

→ Establish IV/IO access.
► Normal Saline, infuse 250 mL IV or IO, repeat up to maximum 1 liter to maintain adequate perfusion
► After initial IM epinephrine given as above, if continued symptoms give Epinephrine 0.1 mg IV / IO (0.1 mg/1 mL concentration), may repeat 0.1 mg IV/IO once after 10 minutes.
► Oxygen by mask or nasal cannula (for nasal cannula provide 6 l/min flow rate as tolerated).
► Diphenhydramine (Benadryl®) 50 mg IM/IV once.
→ Contact Base Hospital and ALS escort to Base designated ERC.

Patients self-treated with Epi-Pen (epinephrine autoinjector) prior to EMS arrival:
Consider patient having received 0.5 mg epinephrine IM and do not repeat IM injection, otherwise follow above steps. ALS escort to ERC for further evaluation even when symptoms resolving.