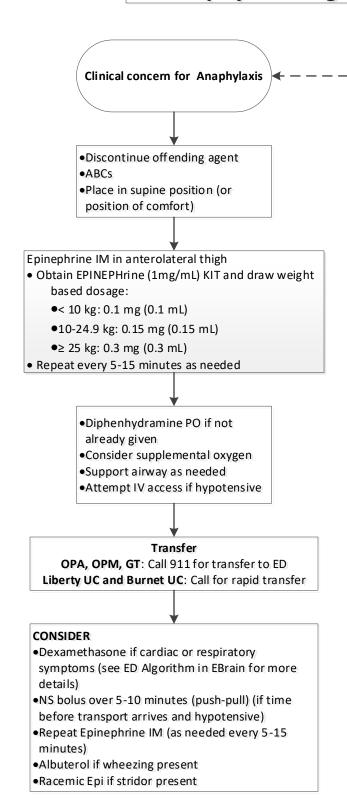
# **Anaphylaxis Algorithm – Urgent Care**



#### Clinical concern for Anaphylaxis with any one of the following:

- No known allergen: Skin/mucosa involvement <u>AND</u> either respiratory compromise or hypotension
- •Known exposure to allergen with hypotension
- Possible exposure to an allergen: with symptoms of 2 or more body systems involved

Body System	Signs and Symptoms
Skin/mucosa	Itching, flushing, urticaria, angioedema, morbilliform rash, swelling of
	lips/tongue/uvula, piloerection
Respiratory	Nasal congestion or itching, rhinorrhea, sneezing, throat itching or tightness,
	dysphonia, hoarseness, stridor, repetitive throat clearing, cough, tachypnea,
	wheezing, dyspnea, shortness of breath, hypoxia, cyanosis, respiratory arrest
Gastrointestinal	Abdominal pain, nausea, vomiting, diarrhea, dysphagia, metallic taste
Cardiovascular	Chest pain, tachycardia, bradycardia, arrhythmias, palpitations, hypotension (which
	may manifest as urinary or fecal incontinence), other signs of end-organ dysfunction,
	cardiac arrest
Central Nervous System	Uneasiness or sense of impending doom, sudden behavioral change (in nonverbal
	patients), altered mental status, headache, tunnel vision, dizziness, confusion,
	syncope, hypotonia

## **Medications in the Urgent Care**

•IM Epinephrine (1mg/mL): Administer into anterolateral thigh when patient is safely and properly restrained.

•< 10 kg: 0.1 mg IM (0.1 mL) •10-24.9 kg: 0.15 mg IM (0.15 mL) •≥ 25 kg: 0.3 mg IM (0.3 mL)

Diphenhydramine: 1 mg/kg (max 50 mg) PO
Dexamethasone: 0.6 mg/kg (max 10 mg) PO/IM

Albuterol MDI & Spacer:
< 15 kg: 4 puffs</li>
≥ 15 kg: 8 puffs

•Racemic Epinephrine: 2.25% (0.5 mL drug mixed in 3 mL NS) nebulization every 20 mins for upper airway

obstruction

#### **Medications for Discharge**

### All patients should receive prescription for:

•Epinephrine auto-injector with teaching

•Cetirizine: 6 months to 5 years: 2.5mg once daily for minimum of 5 days

≥ 6 years: 5 to 10 mg once daily for minimum of 5 days

# Patients receiving meds in Urgent Care should receive same for home use:

•Dexamethasone: give 2<sup>nd</sup> dose in-hand at discharge

•< 15kg: Dexamethasone 6mg PO (36 hrs after initial dose)

•≥ 15kg: Dexamethasone 10mg PO (36 hrs after initial dose)

Albuterol: give MDI in-hand at discharge, or if received neb, Rx

•< 15kg: Albuterol MDI & Spacer 4 puffs (Q4hr x 24 hrs then Q6 hrs prn)

•≥ 15kg: Albuterol MDI & Spacer 6 puffs (Q4hr x 24 hrs then Q6 hrs prn)