

## E03 - ANAPHYLAXIS & ANAPHYLACTIC SHOCK (ALL AGES)

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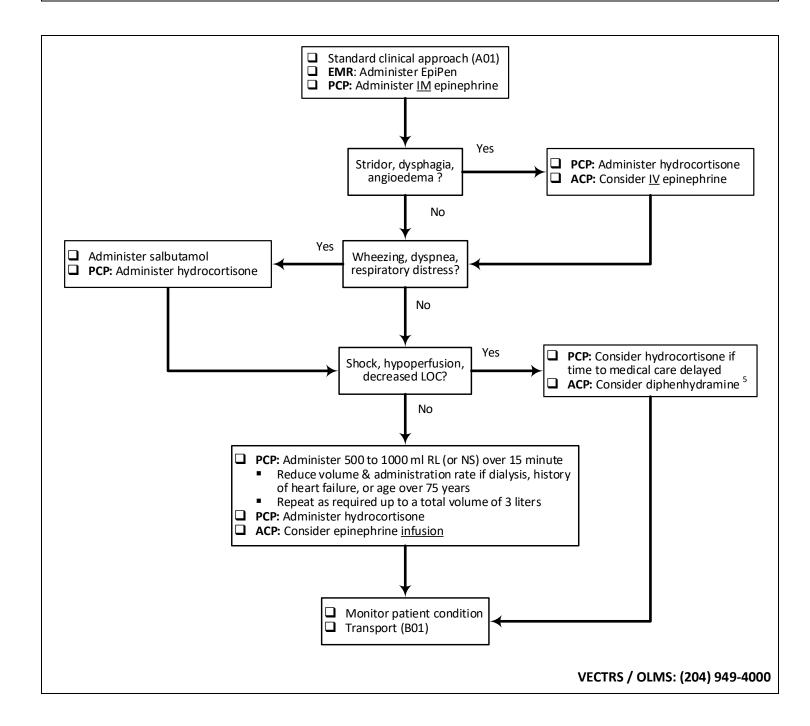
EMR = EMR only

PCP = PCP - ACP

ICP = ICP & ACP

ACP = ACP only

None = EMR - ACP



## PEDIATRIC EPINEPHRINE DOSING (1 mg/ml)

This guide is for dosing only. Refer to the medication documents for additional information required for safe administration.

6 years & older

Up to 6 years

WEIGHT (kg)	EPINEPHRINE (mg)
5 to 10	0.1
11 to 15	0.15
16 to 20	0.2
21 to 25	0.25
26 to 30	0.3
31 to 35	0.35
36 to 40	0.4
41 to 45	0.45
> 45	0.5

If Epi-Pen Jr is not available, use adult Epi-Pen.

**AUTOINJECTOR** 



0.3 mg

Epi-Pen

Epi-Pen JR

0.15 mg

### **INDICATIONS**

- Anaphylaxis
- Anaphylactic shock

#### **WARNINGS**

• Not applicable

#### **NOTES**

- 1. In a patient with a known exposure to an allergen that has previously caused anaphylaxis, paramedics should administer epinephrine and monitor closely, even in the absence of symptoms or signs.
- 2. Angioedema of the upper airway can progress within seconds, even as other symptoms such as wheezing or hives appear to be stable or improving. Monitor continuously for signs of developing airway obstruction.
- 3. Epinephrine is first-line treatment for anaphylaxis and prompt administration is essential. Delayed administration is associated with death from anaphylaxis.

- 4. The onset of action of corticosteroids takes several hours. It is unclear if they prevent a biphasic or protracted reaction, but limited evidence suggests they may be of benefit in patients with severe symptoms or those with known asthma or significant bronchospasm.
- 5. There is scant evidence to support the use of either H1 or H2 histamine blocking agents and they may mask a biphasic reaction. Antihistamines should never be administered as sole therapy for anaphylaxis, but may be helpful as an adjunct for relief of pruritis.

#### **LINKS**

- A01 Standard Clinical Approach
- B01 Standard Destination & Redirection
- M05 Epinephrine
- M13.1 Hydrocortisone
- M15 Salbutamol
- M33 Diphenhydramine

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# **VERSION CHANGES (refer to X05 for change tracking)**

- Addition of advanced (ACP) work scope identifier
- Addition of epinephrine IV & diphenhydramine at ACP level
- Retitled