

Protocol Name	Emergency Medicine – Epinephrine & Benadryl
Created date:	October 13 th , 2020
Revised by:	Dr. Avram Nemetz
Last revised:	05/24/21, 10/31/21, 02/08/22

Purpose:

Used to counteract anaphylactic allergic reaction(s) to an allergen, such as a medication, insect sting/bite, food, etc. Epinephrine acts quickly to improve breathing, stimulate the heart, raise a dropping blood pressure, reverse hives, and reduce swelling of the face, lips, and throat.

Indication:

Epinephrine is always the first line medication for any anaphylactic reaction and may be followed by Benadryl IM, as needed.

- Difficulty breathing
- Shortness of breath
- Severe Wheezing
- Swelling throat
- Swelling eye lids
- Diffuse hives

Assessment:

- Vital Signs – heart rate, respirations, blood pressure, temperature, pain level and O2 sat level
 - Vital Signs will change drastically from 1st set of VS when full anaphylaxis occurs. Goal is to treat patient before this occurs.
- Assess patient for anxiety or panic attack. Deep breathing exercises should be attempted.
- Assess patient and monitor for resolving symptoms.

Contraindications:

- none

Standing Orders/Intervention:


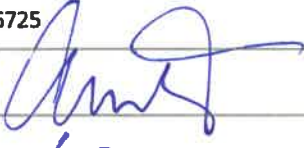
- **Adult/Pediatric 66lbs or >:**
 - **Epinephrine** 0.3 mg (0.3mL) of 1:1000 IM x 1 STAT to lateral thigh and repeat every 5-15 minutes as needed for non-improving anaphylaxis symptoms. [max of 3 doses]
 - **Benadryl** 25-50mg (0.5mL-1.0mL) IM x 1 as needed – as conjunctive therapy ONLY with Epinephrine for treatment of anaphylaxis for rash, itching, or hives.
 - **Benadryl** 25-50mg orally x 1 as needed for non-progressing non-life threatening rash, itching or hives.
- **Pediatric 33-65lbs:**
 - **Epinephrine** 0.15 mg (0.15mL) of 1:1000 IM autoinjector x 1 STAT to lateral thigh and repeat every 5-15 minutes as needed for non-improving anaphylaxis symptoms. [max of 3 doses]
 - **Benadryl** 25mg (0.50mL) IM x 1 as needed – as conjunctive therapy ONLY with Epinephrine for treatment of anaphylaxis for rash, itching, or hives. No oral Benadryl for this weight group.
- **Infants/Toddlers < 32lbs:**
 - **Epinephrine** 0.1 mg (0.1mL) of 1:1000 IM x 1 STAT to lateral thigh and repeat every 5-15 minutes as needed for non-improving anaphylactic symptoms. [max of 3 doses]
 - No IM or Oral Benadryl for this weight group.

Direct EMS activation by nearby clinician at first onset of anaphylaxis.

- Administer IM Epi into the patient's leg muscle [vastus lateralis] – see diagram below.
- Administer Benadryl IM to patients Deltoid.
- Monitor VS and Assess patient for improvement in status after each dose administered
- Transfer care to EMS when available.



- Emergency Medicine – Epinephrine & Benadryl IM - Medication protocol and orders** are to be activated by clinician at any **ON-SITE CLINIC PROGRAM** where an anaphylaxis episode occurs. Upon clinical assessment and necessity, these orders are to be followed by an Affiliated Physician's on-site nurse and documentation of episode is mandatory.

Medical Director – Dr. Avram Nemetz	NPI: 1639206725
Signature:	
Date:	
	2-5-22
	6-20-22