Anaphylactic reaction?

Assess using ABCDE approach

Diagnosis - look for:
- Acute onset of illness
- Life-threatening Airway and/or Breathing and/or Circulation problems
- And usually skin changes

Call for help
- Lie patient flat with raised legs (if breathing allows)

Adrenaline

When skills and equipment available:
- Establish airway
- High flow oxygen
- IV fluid challenge
- Chlorphenamine
- Hydrocortisone

Monitor:
- Pulse oximetry
- ECG
- Blood pressure

Adrenaline (give IM unless experienced with IV adrenaline)
IM doses of 1:1000 adrenaline (repeat after 5 min if no better)
- Adult: 500 mcg IM (0.5 mL)
- Child more than 12 years: 300 mcg IM (0.3 mL)
- Child 6-12 years: 150 mcg IM (0.15 mL)

Adrenaline IV to be given only by experienced specialists
Tritrate: Adults 50 mcg; Children 1 mcg kg⁻¹

Chlorphenamine
(IM or slow IV)
- Adult or child more than 12 years: 10 mg
- Child 6 - 12 years: 5 mg
- Child 6 months to 6 years: 2.5 mg
- Child less than 6 months: 250 mcg kg⁻¹

Hydrocortisone
(IM or slow IV)
- Adult: 500 mg
- Child: 100 mg
- Child: 50 mg
- Child: 25 mg

Life-threatening problems:
Airway: swelling, hoarseness, stridor
Breathing: rapid breathing, wheeze, fatigue, cyanosis, SpO₂ < 92%, confusion
Circulation: pale, clammy, low blood pressure, faintness, drowsy/coma

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