ALS STANDING ORDERS:

1. Pulse oximetry, if oxygen saturation less than 95%:
   ► High flow oxygen by mask as tolerated.
2. For further treatment, categorize reaction into one of three degrees as described and treated below:

Allergic Reaction: mild (rash, urticaria, stable vital signs):

→ Transport to nearest ERC.

Allergic Reaction: moderate (facial/cervical angioedema, respiratory distress or wheezing):

► *Epinephrine 1:1000: 0.01 mg/kg SQ (maximum 0.3 mg).*

► *Diphenhydramine: 1 mg/kg IM/IV (maximum 25 mg).*

If wheezing present:

► *Albuterol, Continuous nebulization of 6.0 mL (5 mg) concentration as tolerated.*

→ ALS escort to appropriate ERC.

Anaphylaxis (hypotension, severe wheezing, respiratory distress):

► *Epinephrine 1:1000: 0.01 mg/kg SQ (maximum 0.3mg).*

For patients with absent palpable pulses or impending airway obstruction:

► *Epinephrine 1:10,000 0.01 mg/kg slow IV/IO (IV access is preferred, maximum 0.3 mg).*

► *Diphenhydramine: 1 mg/kg IV/IO (maximum 25 mg).*

If wheezing present:

► *Albuterol, Continuous nebulization of 6.0 mL (5 mg) concentration as tolerated.*

If signs or symptoms of poor perfusion:

► *Establish IV/IO access*

► *Infuse 20 mL/kg Normal Saline bolus (maximum 250 mL), may repeat twice to maintain perfusion*.

→ ALS escort to nearest ERC or Base Hospital Contact if no response to therapy or condition worsens.

3. If cardiac arrest occurs, treat using cardiac arrest standing orders (SO-P-40).

GUIDELINES:

- If bee sting, check to assure stinger has been scraped from skin.

OCEMS copyright © 2013