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Model Plan: Administration of Epinephrine and Benadryl

NOTE:

The signs and symptoms of anaphylactic shock are: hypotension, respiratory distress such as laryngeal edema, dyspnea, wheezing, a sense of retrosternal pressure or tightness, rapid and/or irregular pulse, urticaria, loss of consciousness, agitation, faintness, burning and/or itching eyes, tearing, congestion and itching nose, rhinitis, nausea, vomiting, abdominal pain, diarrhea, flushed skin, general itching, non-pruritic swelling of extremities as well as the face and perioral or periorbital regions, and/or a sense of uneasiness.

- After an injection of medication and/or vaccine it is determined that the individual has symptoms categorized as mild, the client may only require close monitoring on site with notice to their health care provider..
- Using clinical judgment, when the individual's symptoms progress to those of anaphylactic shock, School Vaccine Providers shall initiate the emergency procedure for the administration of Epinephrine and Benadryl.

Special Instructions:

1. Equipment needed includes:
 - 2 ampules Epinephrine (adrenaline) 1:1000
 - 1 vial of Benadryl (diphenhydramine) 50mg/ml
 - 4 TB syringes
 - (2) 3cc syringes (w/needle-22-25 ga, 1-1.5" length)
 - Alcohol swabs
 - B/P cuff and stethoscope
 - CPR mask
2. All School Vaccine Providers are required to be trained in Health Care Provider cardiopulmonary resuscitation (CPR).
3. In the event of a medical emergency during a clinic session, School Vaccine Providers shall activate emergency medical services and notify the responsible health care provider and/or call an ambulance or other local emergency medical services.

4. School Vaccine Provider staff shall apply CPR if the situation warrants it, unless there is a "Do Not Resuscitate" order in place. The school disclaims any liability for misapplication of this knowledge by the School Vaccine Provider.

In an emergency:

1. Call for assistance
2. Notify local emergency medical services
3. Establish and maintain an airway

To administer Epinephrine and Benadryl, follow the steps below:

1. Administer Epinephrine (per dosage chart/guidelines)
2. Administer Benadryl (per dosage chart/guidelines)
 - A. Using a tuberculin (1cc)-syringe draw up only the amount of Epinephrine needed, based on the weight of the child or the dosage amount for an adult.
 - B. Administer the Epinephrine subcutaneously. NOTE: DO NOT GIVE if symptoms of angina are present.

Epinephrine Dosage Guidelines:*

Epinephrine (Adrenaline Chloride) 1:1000

0.1cc for children < 20 lbs. (0-12 months of age)

0.2cc for children 20 - 45 lbs. (1-4 years old)

0.3cc for children > 45 lbs. (> 4 years of age)

0.3cc for adults

- C. Administer the Benadryl deep I.M. in a large muscle.

Benadryl Dosage Guidelines

****Adult:** Benadryl 50mg. Deep I.M. in large muscle

*****Pediatric Patients other than premature infants or neonates:** Benadryl 1mg/kg Deep IM in large muscle

- D. Observe the clinical condition of the individual including the apical pulse rate and rhythm, respiratory rate, blood pressure, and level of consciousness. Monitor the blood pressure and pulse every 2-5 minutes until stable. Also note a change in any of the symptoms or the development of new symptoms.

- E. If symptoms persist, give a second dose of Epinephrine in 15 minutes, using a second ampule of Epinephrine.
Do not repeat more than one time.
- F. If the individual exhibits signs of shock treat them by having them lie in a supine position with their legs elevated, keeping them warm with blankets, if necessary.
- G. Reassure the individual and the family (if present).
- H. If CPR becomes necessary, institute as per current CPR protocols
The responder must be certified to conduct CPR.

*American Academy of Pediatrics, Abbott Laboratories, American Hospital Formulary Service, Mosby's Nursing Drug Reference

** Nursing 2006 Handbook, 26rd edition . New York: Lippincott Williams & Wilkins.

*** Nelson's Textbook of Pediatrics, 15th edition. Philadelphia: Saunders.