Anaphylaxis/Allergic Reaction

**SYSTEMATIC ASSESSMENT**

Begin the four components of assessment (see Systematic Assessment/Immediate Care and Assessment Tools) and perform interventions AS YOU GO.

**KEY ASSESSMENT POINTS FOR ANAPHYLAXIS**

- **Respiratory assessment**
  - Focused physical examination of skin findings
  - History of systemic allergic reaction
- **History of food allergy**
  - Events preceding reaction, such as a bite/sting

**DETERMINE TRIAGE CATEGORY AND APPROPRIATE INTERVENTIONS**

Determine triage category and activate EMS AS SOON AS the need becomes apparent!

<table>
<thead>
<tr>
<th>EMERGENT</th>
<th>URGENT</th>
<th>NONURGENT</th>
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<tbody>
<tr>
<td><strong>S/S of cardiopulmonary compromise</strong> (see Assessment Tools)</td>
<td><strong>S/S of mild systemic reaction; e.g., localized hives, abdominal cramps, nausea, or vomiting</strong></td>
<td><strong>Local reaction only</strong></td>
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<tr>
<td>Airway compromise</td>
<td><strong>Edema of extremities</strong></td>
<td><strong>Responsive to medications</strong></td>
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<td>Change in mental status or LOC</td>
<td><strong>Persistent coughing</strong></td>
<td><strong>Nasal congestion</strong></td>
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<td>Cyanosis at mouth and lips</td>
<td><strong>Tingling, itching of face, ears, or nose</strong></td>
<td><strong>Persistent sneezing</strong></td>
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<td>S/S of severe respiratory distress</td>
<td><strong>History of allergy</strong></td>
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<td>(wheezing, dyspnea)</td>
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<td></td>
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<tr>
<td>Signs of shock/hypotension</td>
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<tr>
<td>History of anaphylaxis</td>
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<tr>
<td>Edema of face, lips, eyes, or tongue</td>
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<td>Generalized hives involving large area</td>
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<tr>
<td>Diaphoresis</td>
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<td>Complains of (C/o) tightness in throat or chest</td>
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<td>C/o apprehension and/or weakness</td>
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**INTERVENTIONS**

- **Activate EMS**
- **Support C-ABCDE**
- **Administer prescribed autoinjectable epinephrine if available**
- Repeat autoinjectable epinephrine in 10 min if no response
- **Initiate CPR if necessary**
- For severe respiratory distress, administer prescribed bronchodilator
- **Consult IHP/ECP**
  - Directly/continuously observe student
  - Contact parent/guardian
  - Notify school administrator
  - Follow-up

- **Consult IHP/ECP**
  - Observe student closely
  - Administer prescribed autoinjectable epinephrine if available and activate EMS
  - Contact parent/guardian to transport student to medical care or home
  - Follow-up

**URGENT**

- **Determine need for EMS**
- **Consult IHP/ECP**
- Observe student closely
- Administer prescribed autoinjectable epinephrine if available and activate EMS
- Contact parent/guardian to transport student to medical care or home
- Follow-up

**NONURGENT**

- Local reaction only
- Responsive to medications
- Nasal congestion
- Persistent sneezing

**INTERVENTIONS**

- **Apply cold pack to site**
- **Observe student**
- **Contact parent/guardian to transport student to medical care or home**
- Follow-up as needed or per policy

The Illinois Emergency Medical Services for Children School Nurse Committee has exercised extreme caution that all information presented is accurate and in accordance with professional standards in effect at the time of publication. The information does not serve as a substitute for the professional advice of a physician/advanced practice nurse, does not dictate an exclusive course of treatment, and should not be construed as excluding other acceptable methods of treatment. It is recommended that care must be based on the student’s clinical presentation and authorized policies.