EMERGENCY ACTION CARD

retrieve
Adult Critical Care Transfer Service

Anaphylaxis

v1.1

Consider anaphylaxis when unexplained symptoms arise or unexpected cardiac arrest occurs. The ALS anaphylaxis algorithm is on the next page

START: IMMEDIATELY NOTIFY DRIVER, STOP SAFELY

❶ **Immediate actions**
- Follow Key Basic Plan
- Check pulse: if no pulse, treat as cardiac arrest (→ EAC)

❷ **Remove trigger**
- Important culprits: antibiotics, neuromuscular blocking agents, blood product transfusion

❸ **Elevate patient's legs if there is hypotension**

❹ **Treat hypotension (Box C):**
- Remember it **may be resistant and may require prolonged treatment**
- Adrenaline bolus and repeat as necessary x 3 then infusion
- IV fluid bolus 1000ml
- If hypotension resistant, give alternate vasopressor (e.g. noradrenaline)

❺ **Next steps**
- If patient condition significantly changed, consider:
  - Return to referring hospital
  - Diversion to nearest Emergency Department
  - Expedite journey to receiving hospital
- If likely blood component reaction:
  - Administer intravenous hydrocortisone (200mg) and chlorphenamine (10mg)
- Ask receiving hospital to take sample for mast cell tryptase

Box A: CRITICAL CHANGES

- If problem worsens significantly, or a new problem arises, go back to START of Key Basic Plan
- If Transfer Practitioner or Transfer Doctor transfer, contact Remote Duty Consultant
- Consider contacting Leadership SPOC for support, if required

Box B: SYMPTOMS AND SIGNS

- Unexplained hypotension
- Unexplained bronchospasm (wheeze may be absent if severe)
- Unexplained tachycardia / bradycardia
- Angioedema (often absent in severe cases)
- Unexplained cardiac arrest where other causes are excluded
- Cutaneous flushing in association with one or more of the above

Box C: DRUGS FOR ANAPHYLAXIS

- **Adrenaline bolus:**
  - IV/IO 50mcg (0.5ml of 1:10,000)
  - IM 500mcg (0.5ml of 1:1,000) only if no IV access
- **Adrenaline infusion regimes (adult):**
  - 0.5mg (0.5ml 1:1,000) in diluted to 50 ml with 0.9% sodium chloride (10 mcg/ml)
  - Start at 0.5-1.0ml/kg/hr