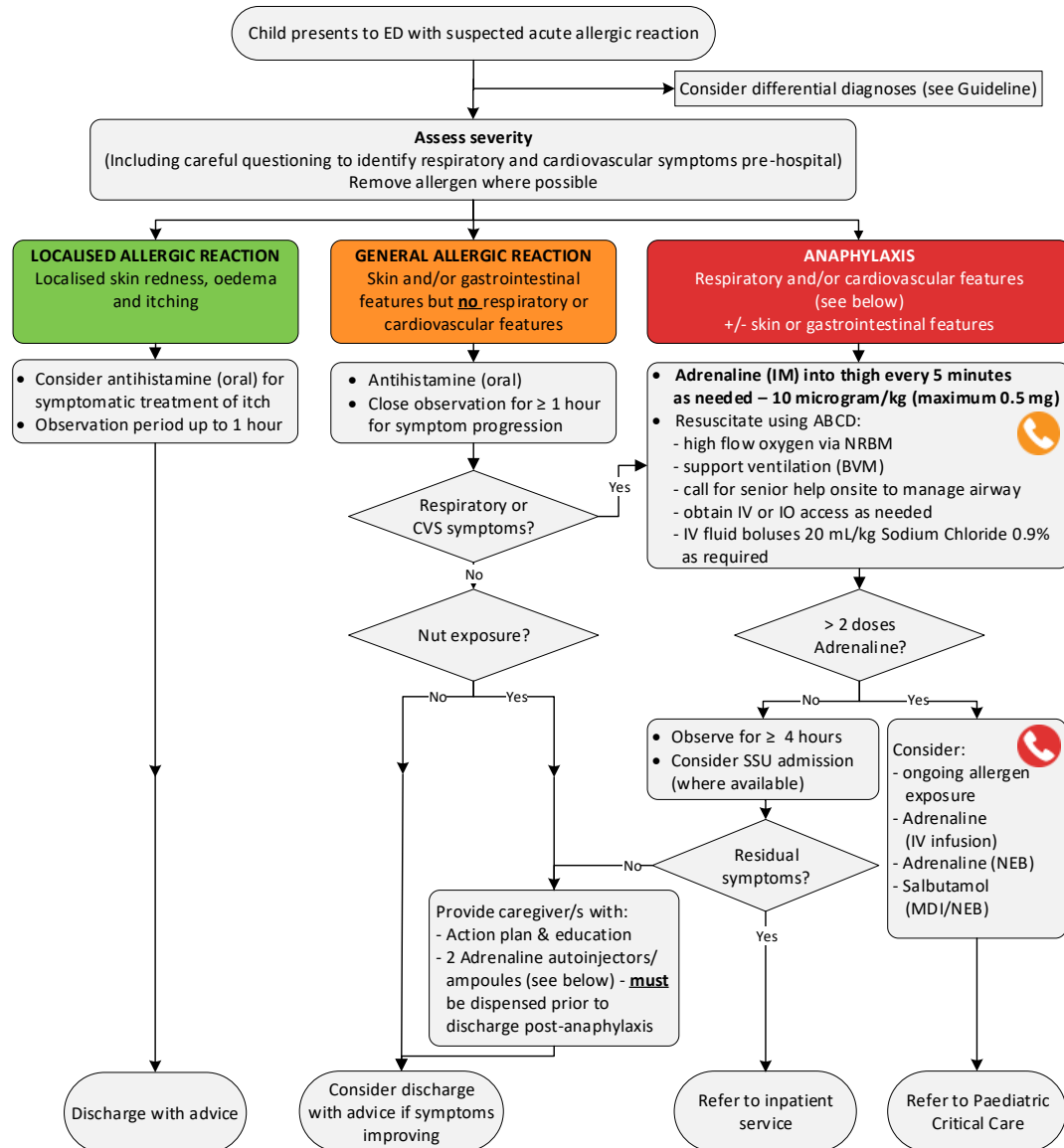


## Queensland Paediatric Flowchart and Medications

## Emergency

# Allergy and anaphylaxis – Emergency management in children – Flowchart



Respiratory features	Cardiovascular features	Adrenaline given on discharge	
<ul style="list-style-type: none"> <li>- difficulty/noisy breathing</li> <li>- swelling of the tongue</li> <li>- swelling/tightness in throat</li> <li>- difficulty talking +/- hoarse voice</li> <li>- wheeze or persistent cough</li> </ul>	<ul style="list-style-type: none"> <li>- loss of consciousness</li> <li>- collapse</li> <li>- pallor and floppiness in young child</li> <li>- hypotension</li> </ul>	Weight of child	Adrenaline
<b>Note:</b> <ul style="list-style-type: none"> <li>• A single respiratory or cardiovascular feature constitutes an anaphylaxis diagnosis.</li> <li>• Manage insect bites or stings with severe abdominal pain and vomiting as for anaphylaxis.</li> <li>• See over page for description of gastrointestinal and cutaneous features.</li> </ul>		< 8.5 kg	Adrenaline ampoules 1:1000
		8.5-20 kg	Epipen Jr autoinjector
		> 20 kg	Epipen autoinjector

Seek senior emergency/paediatric advice as per local practice

Seek urgent paediatric critical care advice (onsite or via Retrieval Services Queensland (RSQ) on 1300 799 127)



## Allergy and anaphylaxis – Emergency management in children – Medications

Adrenaline dosing for the treatment of anaphylaxis in children	
<b>Adrenaline (IM)</b>	<b>See dose banding table below</b> See skill sheet for drawing up <a href="#">Adrenaline in anaphylaxis</a>
<b>Adrenaline (NEB)</b>	5 mL of undiluted 1:1000 Adrenaline nebulised with oxygen
<b>Adrenaline (IV infusion)</b>	1 mL of 1:1000 Adrenaline solution (contains 1 mg) in 50 mL of Sodium Chloride 0.9%. Start infusion at 0.1 microgram/kg/min. <u>With Smart Pump Drug Errors Reducing System</u>  1 mL of 1:1000 Adrenaline solution in (contains 1 mg) in 50 mL of Sodium Chloride 0.9%. Start infusion at 0.3 mL/kg/hour (0.1 microgram/kg/min). <u>Without Smart Pump Drug Errors Reducing System</u>

**ALERT** – Adrenaline IV should be reserved for the following children:



- immediate life-threatening profound shock
- circulatory compromise despite adequate IM Adrenaline dosing and fluid resuscitation
- refractory stridor or bronchospasm
- rebound of anaphylaxis despite recurrent > 2 doses Adrenaline IM
- Ensure senior assistance has been sought

IM Adrenaline dose banding (these doses are as per CREDD 2024)	
Age (years)	Dose and Volume of adrenaline 1:1,000 to administer
Under 1	100 microgram (0.1 mL of 1:1,000)
1-2 years	100 microgram (0.1 mL of 1:1,000)
2 –3 years	150 microgram (0.15 mL of 1:1,000)
4-6 years	200 microgram (0.2 mL of 1:1,000)
7-10 years	300 microgram (0.3 mL of 1:1,000)
11-12 years	400 microgram (0.4 mL of 1:1,000)
Over 12 years	500 microgram (0.5 mL of 1:1,000)

Antihistamine dosing for the treatment of allergic reaction in children		
Antihistamine	Age	Dose
<b>Cetirizine (Oral)</b> (Zyrtec)	1-2 years	2.5 mg twice daily
	2-6 years	5 mg once daily or 2.5 mg twice daily
	6-12 years	10 mg once daily or 5 mg twice daily
	12-18 years	10 mg once daily

\* Loratadine, Fexofenadine and Desloratadine are not available within QH Hospitals but are available in the community. Fexofenadine and Desloratadine can be prescribed to infants 6 months and over.

CHQ-GDL-60011-1 Allergy and anaphylaxis – Emergency management in children - Flowchart

