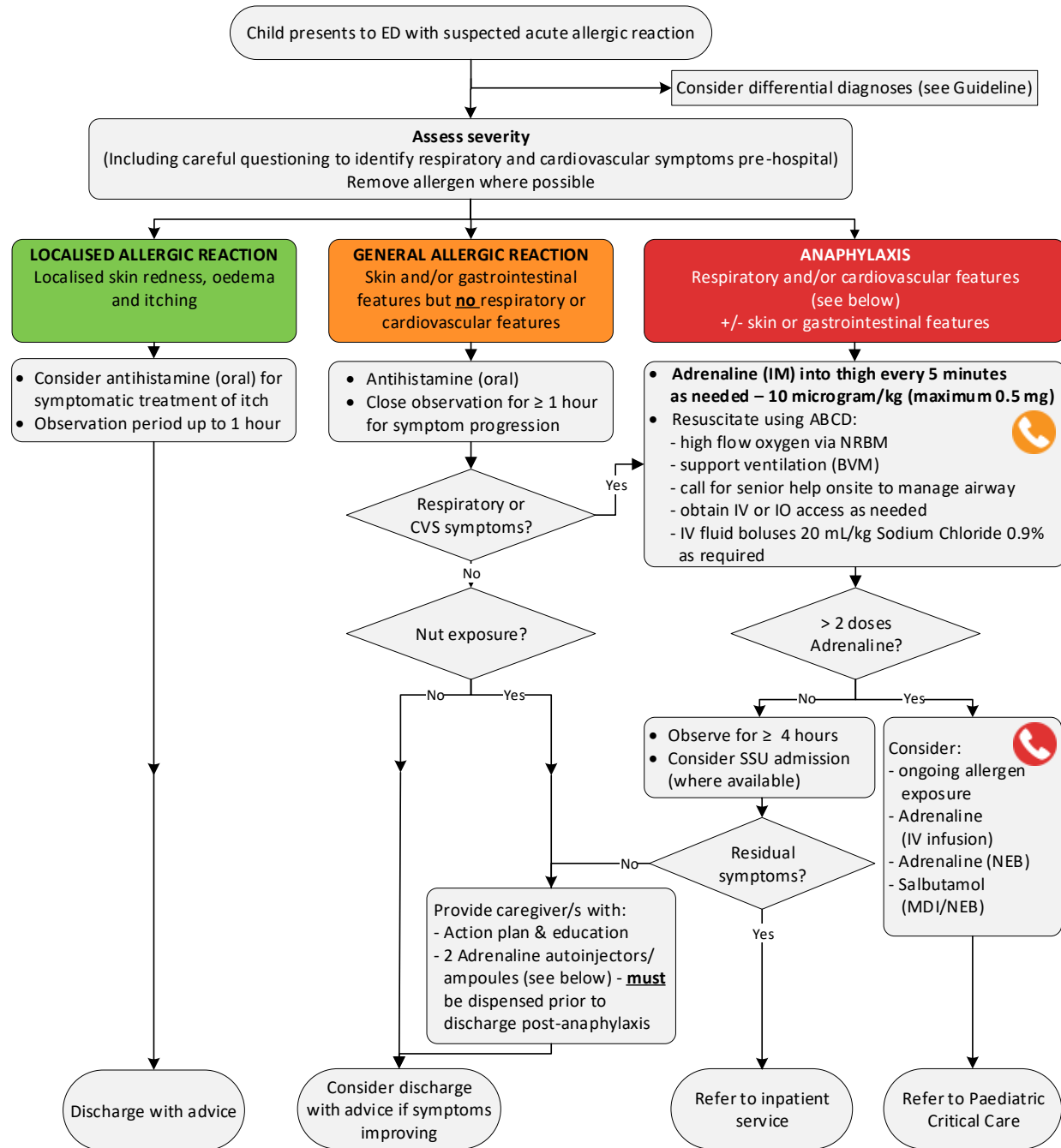


Queensland Paediatric Flowchart and Medications

Emergency

Allergy and anaphylaxis – Emergency management in children – Flowchart



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

Clinical features of a generalised allergic reaction*

Gastrointestinal	Cutaneous
<ul style="list-style-type: none"> abdominal pain vomiting loose stools 	<ul style="list-style-type: none"> generalised pruritus urticaria/angioedema erythema

*May also be present in anaphylaxis

Adrenaline dosing for the treatment of anaphylaxis in children

Adrenaline (IM)	10 microgram/kg (maximum 0.5 mg) ~ 0.01 mL/kg of 1:1000 solution (undiluted)
Adrenaline (NEB)	5 mL of undiluted 1:1000 Adrenaline nebulised with oxygen
Adrenaline (IV infusion)	<p><u>With Smart Pump Drug Errors Reducing System:</u> 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.</p> <p><u>Without 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).</p>

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



- immediately life-threatening profound shock
- circulatory compromise and continuing to deteriorate after Adrenaline IM
- ongoing rebound of anaphylaxis despite recurrent Adrenaline IM

Antihistamine dosing for the treatment of allergic reaction in children

Antihistamine	Age	Dose
Cetirizine (Oral) (Zyrtec)	1-2 years	2.5 mg twice daily
	2-6 years	5 mg once daily or 2.5mg twice daily
	6-12 years	10 mg once daily or 5mg twice daily
	12-18 years	10 mg once daily
Or Fexofenadine (Oral) (Telfast)	6 months to less than 2 years	15 mg twice daily
	2 to 11 years	30 mg twice daily
	12 years and older	60 mg twice daily
Or Loratadine (Oral)* (Claratyne)	1 to 2 years	2.5 mg once daily
	Over 2 years	Weight less than 30kg: 5 mg once daily Weight 30kg and over: 10 mg once daily
Or Desloratadine (Oral)* (Aerius)	6 months to less than 1 year	1mg daily
	1 to 5 years	1.25 mg daily
	6 to 11 years	2.5 mg daily
	12 years and older	5 mg daily

* Loratadine and Desloratadine are not available within QH Hospitals but available in the community

For more information refer to [CHQ-GDL-60011 – Allergy and anaphylaxis – Emergency management in children](#)

