

# Management of Anaphylaxis in a Non-Hospital Setting

1. **Assess** airway, breathing and circulation.
2. **Direct someone to call 911** (where available) or emergency medical services.
3. **Position** the individual on their back with lower extremities elevated. If experiencing respiratory distress, the individual should be placed in a position of comfort (elevate head and chest if possible). Place the individual on their side if vomiting or unconscious. If the individual is pregnant, they should be placed on their left side.
4. **Administer epinephrine intramuscularly in the mid-anterolateral aspect of the thigh:**  
Epinephrine should be administered by 0.01mg/kg body weight of 1:1000 (1mg/mL) solution. Repeat every 5 to 15 minutes as needed, for a maximum of **three doses**.

**Table 1: Epinephrine Dosage by Age or Weight**  
(Weight is the preferred basis for determining dosage but if unknown, use age as a guide)

| 1:1000, 1mg/mL solution                       |                |                   |
|---|----------------|-------------------|
| Age   | Weight         | Dose by Injection |
| Birth to less than 5kg                        | Less than 5kg  | 0.1mL             |
| Greater than 5kg but less than 2 years of age | 5-10kg         | 0.1mL             |
| 2 to less than 4 years of age                 | 11-15kg        | 0.15mL            |
| 4 to less than 7 years of age                 | 16-20kg        | 0.2mL             |
|   | 21-25kg        | 0.25mL            |
| 7 to less than 10 years of age                | 26-30kg        | 0.3mL             |
|   | 31-35kg        | 0.35mL            |
| 10-12 years of age                            | 36-40kg        | 0.4mL             |
|   | 41-45kg        | 0.45mL            |
| Older than 12 years of age                    | 46kg and above | 0.5mL             |

5. **Monitor** the individual's respiratory effort, pulse and level of consciousness.
6. **Transfer** the individual to hospital or clinic immediately for evaluation and observation.
7. **Document** all events, and complete AEFI form.

**Emergency Telephone Number:** \_\_\_\_\_

NOTE: In the event of an anaphylactic type reaction all events must be documented and the nursing manager and Communicable Disease Nurse for the region should be notified as soon as possible.