

KCH ED OBSERVATION UNIT: Allergic Reaction Clinical Guidelines

CRITERIA:

Inclusion

- Local skin eruptions
- Able to speak in full sentences
- Administration of subcutaneous epinephrine
- Angioedema status post ENT consult and scope with no airway involvement
- No signs of respiratory distress

Exclusion

- Unstable or significantly abnormal vital signs (hypotension, fever)
- O2 saturation less than $\leq 90\%$
- Stridor or other evidence of acute or impending airway compromise
- EKG changes (if done)
- Any factor that will preclude discharge within 48 hours
- Any other need for inpatient admission

INTERVENTIONS:

- Serial exams every 4-6 hours
- Serial vital signs every 4 hours
- Telemetry and oxygen saturation monitoring
- IV Fluids as needed
- Antihistamines
- Corticosteroids (IV, PO)
- Patient education
- Diet

Optional

- Supplemental oxygen
- Albuterol +/- ipratropium
- Chest X-ray Imaging
- Epi-pen teaching

DISPOSITION:

Home:

- Stable vital signs
- Resolution or improvement in local skin irritations and/or respiratory function
- Adequate follow up established

Admission:

- Unstable vital signs (hypotension, tachypnea)
- Inability to take PO medications
- Significant respiratory symptoms persist
- Delayed reaction or reoccurrence
- Another acute process becomes apparent
- Does not meet discharge criteria after observation period

Please note additional orders, such as patient's home medications can be ordered for standing administration.