

Management of anaphylaxis

Anaphylaxis occurs without warning. **Adrenaline** must be immediately at hand whenever a vaccine is given. When a doctor is not readily available, a Registered Nurse or Aboriginal Health Practitioner must implement the following regimen:

- Lay the patient on their left side and keep the airway clear. If the patient is conscious, lie supine and elevate the legs (unless this results in breathing difficulty).
- **Give adrenaline 1:1000 by deep intramuscular injection into the anterolateral thigh.**

Note: Use a 1 ml syringe and 23G needle.

| AGE / WEIGHT | DOSE OF ADRENALINE (ml of 1:1000) |
|----------------------------------|--------------------------------------|
| < 1 year (5 – 10 kg) | 0.05-0.1 ml |
| 1-2 years (approx 10 kg) | 0.1 ml |
| 2-3 years (approx 15 kg) | 0.15 ml |
| 4-6 years (approx 20 kg) | 0.2 ml |
| 7-10 years (approx 30 kg) | 0.3 ml |
| 10-12 years (approx 40 kg) | 0.4 ml |
| >12 years and adult (over 50 kg) | 0.5 ml |

Repeat at 5-minute intervals until improvement occurs.

- Maintain airway and give 100% oxygen by face mask at a high flow rate.
- If breathing stops or the carotid pulse is not palpable begin cardio-pulmonary resuscitation.
- Contact the doctor or ambulance.
- Send to hospital.

Report all cases of anaphylaxis following vaccination to the Disease Control Centre in your district.

Adapted from NHMRC The Australian Immunisation Handbook 10th Edition