HYPERSENSITIVITY ORDER SET
Pure Infusion Suites

Mild Infusion Reaction:
Mild headache, flushing (transient), cough (mild), patchy macular and/or popular rash, itching, hives, nausea/vomiting (mild), diarrhea (mild), rhinitis/tickle in throat.

1. Stop or slow infusion (½ of rate)
    - Assess vital signs at least every 15 minutes x 30 minutes.
2. If symptoms improve:
    - Reinitiate rate titration OR restart infusion at half the rate and titrate per RN discretion to maximum rate.
3. If symptoms do not improve or worsen after step 1:
    - Stop infusion (if not already stopped)
    - Hang 500cc bag of normal saline, maintaining at least TKO rate and no faster than 500ml/hr.
    - Give the following medications:
        - Give 25mg Benadryl IVP over 2 minutes
        - Give 20mg Pepcid IVP over 2 minutes
        - Give Tylenol 1000mg PO x1 if patient is febrile.
        - Continue vital signs at least every 15 minutes
4. If symptoms improve 30 minutes after step 3:
    - Restart infusion at ½ the rate which the reaction occurred for at least 30 minutes.
    - Titrate every 15- 30 minutes per RN discretion to maximum rate.
5. If symptoms do not improve or they worsen within 30 minutes from step 3:
    - Give 125mg Solumedrol IVP over 1 minute
    - Continue vital signs at least every 15 minutes
6. If symptoms improve 30 minutes after step 5:
    - Restart infusion at ½ rate at which the reaction occurred for at least 30 minutes.
    - Titrate per RN discretion to maximum rate
7. If symptoms worsen at any point after step 5:
    - Go to moderate infusion reaction
    - Give additional medications per step 2 as applicable.
    - Call provider
    - Do not reinitiate infusion

Moderate Infusion Reaction:
Increased severity of the following: patchy macular and/or popular rash, itching, nausea, diarrhea, flushing, cough. New shortness of breath, tightness in chest, flu like symptoms, fever, back discomfort, feeling cold/hot, rigors, hypotension/hypertension < 20% from baseline, HR >110, temperature increase by one degree OR is 38C-38.9C, changes in mental status.

1. **STOP INFUSION:**
    - Hang 500cc NS and infuse at 500cc/hr
    - If SBP less than 90 or DBP less than 50 hang 1000cc NS and infuse at 1000ml/hr.
    - Assess vital signs at least every 10 minutes
    - If oxygen saturation is below 90%, give the patient oxygen per nasal cannula at least 2L to keep sats above 90%
    - If unable to keep oxygen saturation levels above 90% using the nasal cannula, then place a nonrebreather at 15L on the patient
2. Give the following medications:
    - Give diphenhydramine 25-50 mg IVP over 2 minutes
        - If diphenhydramine was administered in any dose as a premedication reduce dose to 25mg IVP
        - Maximum dose 75 mg - including premeds and all reversal meds
    - Give Pepcid 20mg IVP x 1 over 2 minutes
        - Maximum dose 20 mg - including premeds and all reversal meds
    - Give solumedrol 125 mg IVP x1
        - Maximum dose 125 mg - including premeds and all reversal meds
    - Give albuterol, 90mcg, 2 inhalations for wheezing or moderate shortness of breath.
        - Repeat every 4 hours as needed for shortness of breath or wheezing
    - Give 1000 mg tylenol PO x 1 for temperature > 38C
3. If symptoms have resolved for 30 minutes after step 2:
    - Restart infusion at ½ rate at which the reaction occurred for at least 30 minutes.
    - Titrate per RN discretion to maximum rate
    - Monitor closely
4. If symptoms return after above reinitiation:
    - Stop infusion immediately
    - Give any remaining reversal medications, if applicable
    - Do not reinitiate infusion
    - Call provider
    - Call EMS if patient does not improve
    - Follow severe reaction steps if symptoms worsen

Severe Infusion Reaction (anaphylaxis):
Worsening of moderate symptoms. Wheezing, chest pain/heaviness, oxygen saturation < 90%, swelling of lips/tongue/face, tachycardia, dysrhythmias, stridor, hypotension - severe (SBP <80 Hg or >20% from baseline), cyanosis, respiratory distress, unconsciousness.

1. **STOP INFUSION:**
    - Discontinue any medication suspected of causing reaction
    - Give 1000ml NS wide open using new administration set
    - Place patient in recumbent position, if tolerated
    - Maintain airway
    - VS every 5 minutes, place continuous pulse ox.
    - Administer 10L per non-rebreather mask to keep sats above 90%
2. Give Epinephrine 0.3mg IM immediately, may repeat every 5 to 15 minutes as needed
3. Give the following medications:
    - Give Benadryl 50mg IV push
        - Maximum dose 75 mg - including premeds and all reversal meds
    - Give Pepcid 20mg, IV push
        - Maximum dose 20 mg - including premeds and all reversal meds
    - Give Solumedrol 125mg IV push
        - Maximum dose 125 mg - including premedications and all reversal meds
    - Give albuterol, 90mcg, 2 inhalations for wheezing or moderate shortness of breath.
        - Repeat every 4 hours as needed for shortness of breath or wheezing
    - If patient becomes unconscious perform basic life support until EMS arrives
    - Notify provider at soonest opportunity

Other Orders:

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Patient's Information

_____
First Name Last Name M.I.

_____
Date of Birth

Prescribing Provider

_____
Provider Name

_____
Address

_____
City State Zip

_____
Phone Fax

_____
Signature Date