

WHAT IF MY BABY OR CHILD DOES HAVE AN ALLERGIC REACTION TO PEANUTS? (...OR OTHER FOODS...OR BEES?)

by Doug Puder., MD



Anaphylaxis Emergency Action Plan

Clarkstown Pediatrics logo and contact information.

Modified from guidelines of the American Academy of Allergy Asthma & Immunology.

patient Name: _____ Age: _____

Allergies: Yes (high risk for severe reaction) No

Additional health problems besides anaphylaxis: _____

Concurrent medications: _____

Symptoms of Anaphylaxis:
 MOUTH: itching, swelling of lips and/or tongue
 THROAT: itching, tightness/obstruction, hoarseness
 SKIN: itching, hives, redness, swelling
 GUT: vomiting, diarrhea, cramps
 LUNGS: shortness of breath, cough, wheeze
 HEART: weak pulse, dizziness, passing out

Only a few symptoms may be present. Severity of symptoms can change quickly. Some symptoms can be life-threatening. ACT FAST!

Emergency Action Steps - DO NOT HESITATE TO GIVE EPINEPHRINE!
 1. Inject epinephrine in thigh using (check one):
 Auvi-Q (0.15 mg) Auvi-Q (0.3 mg)
 EpiPen Jr (0.15 mg) EpiPen (0.3 mg) (or generic epinephrine)

Specify others: _____

IMPORTANT: ASTHMA INHALERS AND/OR ANTIHISTAMINES CAN'T BE DEPENDENT ON IN ANAPHYLAXIS.

2. Call 911 or rescue squad (before calling contact)

3. Emergency contact #1: home _____ work _____ cell _____
 Emergency contact #2: home _____ work _____ cell _____

Comments: _____

845-623-7100

Doctor's Signature/Date/Phone Number _____

Parent's Signature (for individuals under age 18 yrs)/Date _____
 35 South Street, Nanuet NY 10954 200 East Cokeron Road, New City NY 48 Route 9W, Stony Point NY
 www.ClarkstownPediatrics.com

Junior strength 0.15mg
weight under 45 lbs

senior strength 0.3mg
weight 45 lbs or more



Allergy to peanuts or other foods still occurs in some babies and children even if the advice in this *Parentletter* is followed.

The foods which concern us the most are nuts, peanuts, shellfish, eggs, cow's milk, wheat, and soy. If your child has a rash for the first time after eating a particular food, especially if the rash looks like hives (welts), call us. If there are any other symptoms such as wheezing, trouble breathing, lip swelling, "throat closing" **call 911 immediately!**

Once your child is stabilized from this initial allergic reaction, we will develop an allergy action plan. Reactions to nuts, peanuts, shellfish, and bees are possibly life threatening so an allergist should be involved as well.

Clarkstown Pediatrics is now using an allergy form for daycare or schools which is derived from the *American Academy of Allergy Asthma & Immunology*. It will replace the various allergy forms generated by schools as it is clearer and addresses some key points:

1. Why don't you recommend Benadryl (diphenhydramine) during an emergency allergic reaction (anaphylaxis) anymore?
Because it takes over 30 minutes to work, it will help the itch and rash but it won't rescue the airway in an emergency. When benadryl is given, valuable time is wasted in doing what matters most, **give adrenalin (Epipen or Auvi-Q) and call 911!**
2. What dose of adrenalin should be used if my child weighs too much for the Junior strength (0.15) but not enough for the Senior strength (0.3mg)?

This is a problem since only two strengths of adrenalin exist at this time. The side effect of too much adrenalin is heart racing or vomiting, while too little adrenalin could lead to cardiac arrest. Therefore, most allergists and pediatricians favor the use of the **senior strength for children weighing 45 lbs or more.** (We think the original 66lb recommendation should be changed.)

3. If I give adrenalin and my child seems fine, should I still call 911?
Yes! Rebound reactions can occur hours after the initial reaction without any further exposure. Epinephrine/adrenalin administration requires immediate activation of Emergency Medical Services, or 911.
4. What should I do with my expired Epipens/Auvi-Q?

While proper disposal of medication is always recommended, we suggest you use expired devices for practice: try injecting into a steak through a piece of clothing and watch to see how it works. But do not keep expired devices around. Always carry a device with you and ideally carry two units. You can always call us or use the patient portal for refills.

5. Should I try to carry two doses of epipen/Auvi-Q?

Yes, in case your child does not respond to the first dose.

Clarkstown Parentletter Douglas Puder, MD,FAAP, Editor,Illustrator
Monica Hamburg, MD, FAAP, Asst Editor Jeffrey Karasik,MD,FAAP Gregg Rockower, MD, FAAP

We hope you find our Parentletter helpful and informative. Please keep in mind that receipt of this newsletter does not create a doctor/patient relationship and that it is not meant to serve as a substitute for professional medical advice. For particular pediatric medical concerns, including decisions about diagnoses, medications and other treatments, or if you have any questions after reading this newsletter, we encourage you to speak with your child's pediatrician.