

Anaphylaxis Flow Sheet

Dr. Victoria E. Cook

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130-3200 Shelbourne St, Victoria, BC
P: 250 595 7844 F: 250 595 3744

Patient:

PHN:

DOB:

Weight:

Date: _____ Staff Involved: _____

Patient procedure (check one):

- Oral food challenge
- Drug challenge
- Vaccine challenge
- Oral immunotherapy
- Subcutaneous immunotherapy
- Sublingual immunotherapy

Specific allergen and dose administered: _____

Resuscitation medication dosing based on weight:

- Epinephrine (1:1000 0.01mg/kg*): _____
**pre drawn Epinephrine in colored coded plastic bins in shot fridge, autoinjectors in all rooms*
- Salbutamol (100mcg) with spacer device
 - <20 kg: 5 puffs
 - >20 kg: 10 puffs

Patient History/Comments:

Time:	BP: HR: RR: SpO ₂ :	Assessment:	Intervention:
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Time paramedics called:

Time paramedics arrived:

Time of transfer of care/departure:

Post-transfer checklist:

- Anaphylaxis Flow Sheet and Patient Note faxed to appropriate ED
- Phone handover to ED Physician by treating MD
- Post-anaphylaxis debrief
- Task set to book follow up debrief call with patient