



# Management of Anaphylaxis for Paediatric Patients from 12-16 years of Age for Pfizer-BioNTech COVID-19 mRNA Vaccine for COVID Immunization Clinic – Medical Directive

**Medical Advisory Committee Approved: 18AUG021**

Harmonized

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## Authorizing Prescriber(s)

Lakeridge Health (LH) Physician(s) for the COVID Immunization Clinic (CIC) at LH.

## Authorized to Whom

Regulated Health Care Providers (RHCP) working in the CIC with the knowledge, skill, judgement and training to administer oxygen, administer intramuscular (IM) treatments, and administer a substance by injection or inhalation.

## Patient Description/Population

Any patient of the CIC 12 to 16 years of age, who has received the Pfizer-BioNTech COVID-19 mRNA vaccine in the CIC and demonstrating signs and symptoms of a severe life-threatening anaphylactic reaction ([Appendix A](#)).

Note: age includes youth turning 12 years of age in the current calendar year.

## Order and/or Procedure – 12 to 16 years of age

Order and/or Procedure These procedures are not presented in sequential order; any one of or combination of these procedures below may be performed by an authorized RHCP.

The authorized implementer may administer EPINEPHrine, diphenhydrAMINE, and Salbutamol to patients who are determined to be experiencing anaphylaxis, using the procedure below and the table of orders shown in [Appendix A](#). Steps 1-4 should be done promptly and simultaneously.

1. Briefly assess circulation, airway, breathing, mental status, and skin.
2. If signs of anaphylaxis are seen, call or direct someone to call:
  - At a hospital site: a Code Blue by dialing 611
  - At a non-hospital site: Call 911.
3. Position the patient on the left lateral side-lying position if there is respiratory distress; elevate the lower extremities. Also place the patient on their side if vomiting or unconscious.
4. Inject first dose of EPINEPHrine intramuscularly in the mid-anterolateral aspect of the thigh (or other IM site if unavailable) according to the order table in [Appendix A](#).

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- Ensure the patient lies down. The patient should remain in a left lateral side-lying position following receipt of an EPINEPHrine injection and monitored closely.
- 5. For airway obstruction, perform airway positioning techniques such as head tilt, chin lift and/or jaw thrust. Secure an oral airway if necessary and the patient is unconscious (see [Appendix A](#) for order). Manage the airway including support of oxygen and ventilation.
- 6. Oxygen therapy as required to maintain oxygen saturation above 92%. Apply medical mask to the patient and use non-rebreather oxygen mask.
- 7. Administer a dose of IM diphenhydrAMINE, according to the order table in [Appendix A](#), to relieve itching, flushing, urticaria, and nasal and eye symptoms.
- 8. Monitor vital signs every 5 minutes and reassess patient to guide medication use.
- 9. Arrange for rapid transport to emergency department.

### Indications to the Implementation of the Directive

Patient who is having symptoms of anaphylaxis post the administration of COVID-19 vaccine.

See orders table in [Appendix A](#) for indications.

### Contraindications to the Implementation of the Directive

This medical directive must not be implemented in the following circumstances:

- The patient, Substitute Decision Maker (SDM) and/or guardian refuses to provide verbal consent/assent,
- The patient is less than 12 years of age
- Procedure specific contraindications in the Order Table with [Appendix A](#) .

### Consent

The RHCP implementing this medical directive must obtain consent/assent, of the patient/parent/guardian if they are capable of providing it. In an emergency situation, if the patient is not capable of providing consent/assent, the RHCP may administer treatment without consent if, in his/her opinion, all of the following are true:

- The patient is incapable with respect to the treatment;
- The patient is experiencing severe suffering or is at risk, if the treatment is not administered promptly, of suffering serious bodily harm; and

- It is not reasonably possible to obtain a consent or refusal on the patient's behalf, or the delay required to do so will prolong the suffering that the patient is experiencing or will put the patient at risk of suffering serious bodily harm.

### **Documentation Requirements**

The RHCP will document the event and actions taken (with timelines noted as accurately as possible) on the record forms available. All suspect and confirmed anaphylactic reactions following vaccination will be reported to Durham Public Health Department as an adverse vaccine event as per the Health Protection and Promotion Act.

### **Review/Evaluation Process**

Paediatrics will review this medical directive every 2 years

### **References**

Canadian Immunization Guide.

Covid-19 Vaccine Lakeridge Health Monograph.

Ministry of Health. COVID-19 Administration of Pfizer-BioNTech COVID-19 Vaccine. Version 1. December 13, 2020.

PFIZER-BIONTECH COVID-19 Vaccine Product Monograph. COVID-19 mRNA Vaccine, Suspension for Intramuscular Injection.

Government of Ontario (2017). Regulated health professions act, 1991 S.O. 1992, chapter 18. Retrieved from <https://www.ontario.ca/laws/statute/91r18>



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\*\*\*This table must **not** be used independently apart from the Medical Directive\*\*\*

**Appendix A: Order Table Form**

Order	Indication	Contraindication	Notes (Optional)
Insert oral airway	To relieve airway obstruction in an unconscious, patient	Patient is conscious	
<p><b>Dosage:</b>  <b>EPINEPHrine 0.5 mg (0.5 mL of 1 mg/mL of 1:1000 solution) IM every 5 to 15 minutes as needed, for a maximum of three doses.</b></p> <p><b>Call 911.</b></p>	<p>Any of the following signs and symptoms in 2 or more body systems:</p> <p>Skin</p> <ul style="list-style-type: none"> <li>• hives</li> <li>• progressive, painless swelling (angioedema) around the face and mouth, which may be preceded by itchiness, tearing, nasal congestion or facial flushing</li> </ul> <p>Respiratory</p> <ul style="list-style-type: none"> <li>• sneezing, coughing, wheezing, laboured breathing and upper airway swelling (indicated by hoarseness and/or difficulty swallowing) possibly causing airway obstruction</li> </ul> <p>Gastrointestinal</p> <ul style="list-style-type: none"> <li>• cramping abdominal pain, nausea, vomiting and diarrhea</li> </ul> <p>Cardiovascular</p> <ul style="list-style-type: none"> <li>• chest pain, palpitations, tachycardia, sudden reduced blood pressure or symptoms of end-organ dysfunction (e.g. altered mental status, hypotonia, and incontinence).</li> </ul> <p>Other</p> <ul style="list-style-type: none"> <li>• fever (over 40 °C),</li> <li>• seizures</li> </ul>		<p>Use a different site for each dose.</p> <p>Monitor vital signs a minimum of every 5 minutes and reassess patient to guide medication use</p> <p>For all but the mildest cases of anaphylaxis, patients should be monitored for at least 12 hours.</p>



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Order	Indication	Contraindication	Notes (Optional)
<b>diphenhydrAMINE 50mg IM x 1 dose</b>	Presence of itching, flushing, urticaria, nasal symptoms or eye symptoms following the administration of IM EPINEPHrine	Hypersensitivity to the drug or any ingredients in the formulation	
<b>Salbutamol MDI 8 -10 puffs inhaled q15 minutes up to 3 times</b>	If on auscultation: <ul style="list-style-type: none"><li>• Wheezing</li><li>• silent chest</li><li>• crackles</li></ul>	Do not administer Salbutamol if there is a documented allergy	Explain to the patient and/or SDM when possible.  Position patient in Semi to High Fowlers when possible.