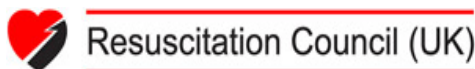


Protocol for Intramuscular Adrenaline 1:1000 for the treatment of anaphylactic reactions.

Prescribing tip for information



Midlands and Lancashire Commissioning Support Unit have recently developed a [Lancashire wide protocol](#) for the use of intramuscular adrenaline 1:1000 for the treatment of anaphylactic reactions.



MLCSU Lancashire
Adrenaline Protocol

The protocol is designed for use by registered nurses or other registered health professionals who have completed training in the recognition and treatment of anaphylaxis including practical training in basic life support. **The Resuscitation Council (UK) recommend that updates in Basic Life Support and anaphylaxis treatment to be undertaken on an annual basis.**

NB: The Medicines Act 1968 prevents a person from administering a parenteral prescription only medication to another person unless they are acting in accordance with the directions of an appropriate practitioner. However, there are exemptions to this restriction. **Anyone in an emergency can administer up to 1mg of intramuscular adrenaline injection 1:1000 (1mg/ml) for the emergency treatment of anaphylaxis without the need for a PGD or prescription.**

Anaphylaxis packs should consist of

- At least two ampoules of adrenaline (epinephrine) 1:1000
- Four 23G needles and four graduated 1ml syringes (suitable for measuring 0.05ml graduations)

Any anaphylaxis kits held within treatment areas should be **checked at defined intervals to ensure that the contents of the pack are within their expiry dates.**

To help identify the likely trigger for an anaphylactic reaction it is important to record in patient's clinical record

- A description of the reaction with circumstances and timings.
- A list of administered treatments,

Adverse reactions including anaphylactic reactions should be reported to the Medicines and Healthcare Products Regulatory Agency (MHRA) using [the yellow card scheme](#).

To contact the Medicines Optimisation Team please phone 01772 214302