

Allergic Reactions

Allergic reactions can be triggered by foods, medications, insect stings, pollen, or other substances. Although most allergic reactions aren't serious, severe reactions can be life-threatening and can require immediate medical attention.

Avoid substances that are known to trigger an allergic reaction in the child. Keep an oral antihistamine such as cetirizine (Zyrtec) available. If the child has a severe allergy, be sure that doctor prescribed injectable epinephrine (Auvi-Q or EpiPen) is kept with or near the child at all times, and that you, caretakers, and the child (if old enough) know how to use it

Signs and Symptoms:

Mild Reaction:

- Itchiness
- Mild skin redness or swelling
- Stuffy, runny nose
- Sneezing
- Itchy, watery eyes
- Red bumps (hives) that occur anywhere on the body

Severe Reaction:

- Swelling of the face or mouth
- Difficulty swallowing or speaking
- Wheezing or difficulty breathing
- Abdominal pain, nausea, or vomiting
- Dizziness or fainting

What to do:

1. Contact a doctor if a child has an allergic reaction that is more than mild or the reaction concerns you.
2. If the child has symptoms of a mild reaction, give an oral antihistamine such as Zyrtec or Claritin.
3. If the child has symptoms of a severe allergic reaction and you have injectable epinephrine, immediately use it as directed and call for emergency help.

Seek emergency medical care if the child:

- Has any symptoms of a severe allergic reaction
- Was exposed to a food or substance that has triggered a severe reaction in the past.
- Was given injectable epinephrine.

<https://bluefishmd.com/general-health-topics/allergy-and-asthma/allergic-reactions/>

Revised on 9.10.2022

Disclaimer: These guidelines are to help the caretaker with treatment at home. However, if you are ever concerned about your child's health, you should see a physician in person.

Allergy medication dosing charts

Children's Loratadine/Cetirizine/Levocetirizine (Claritin/Zyrtec/Xyzal) Dosing	
Age	Dose
6 months – 12 months	1.25 mL daily, do not take more than 2.5 mL in 24 hours
1-2 years	2.5 mL daily, do not take more than 5 mL in 24 hours
2 – 6 years	5 mL daily, do not take more than 10 mL in 24 hours
6+ years	5 - 10 mL daily, do not take more than 20 mL in 24 hours

Children's Fexofenadine (Allegra) Dosing (30 mg per 5 mL)	
Age	Dose
6 months – 2 years	2.5 mL once or twice daily, do not take more than 5 mL in 24 hours
2 – under 11 years	5 mL once or twice daily, do not take more than 10 mL in 24 hours
12 years and older	10 mL twice daily, do not take more than 20 mL in 24 hours

Children's Diphenhydramine HCL (Benadryl) Allergy Dosing (1+ Years Old)*			
Weight (lbs)	Dose – Liquid (12.5 mg/5mL)	Dose – Chewable (12.5 mg)	Dose – Capsule (25mg)
20 – 24 lbs.	3.75 mL every 6 hrs, no more than 15 mL in 24 hrs	N/A	N/A
25 – 37 lbs.	5 mL every 6 hrs, no more than 20 mL in 24 hrs	1 tablet every 6 hrs, no more than 4 tablets in 24 hrs	N/A
38 – 49 lbs.	7.5 mL every 6 hrs, no more than 30 mL in 24 hrs	1½ tablets every 6 hrs, no more than 6 tablets in 24 hrs	N/A
50 – 99 lbs.	10 mL every 6 hrs, no more than 40 mL in 24 hrs	2 tablets every 6 hrs, no more than 8 tablets in 24 hrs	1 capsule every 6 hrs, no more than 4 caps in 24hrs
100+ lbs.	N/A	4 tablets every 6 hrs, no more than 16 tablets in 24 hrs	2 capsules every 6 hrs, no more than 8 caps in 24hrs

***USE OF DIPHENHYDRAMINE (BENADRYL) IS GENERALLY DISCOURAGED, unless otherwise directed by a physician.** Newer allergy medications such as Cetirizine (Zyrtec), Loratadine (Claritin), and Fexofenadine (Allegra) are just as effective, work just as quickly, last longer with less frequent dosing, and are safer with far fewer side effects.

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