Medical Management of Vaccine Reactions in Adult Patients

All vaccines have the potential to cause an adverse reaction. In order to minimize adverse reactions, patients should be carefully screened for precautions and contraindications before vaccine is administered. Even with careful screening, reactions may occur. These reactions can vary from trivial and inconvenient (e.g., soreness, itching) to severe and life-threatening (e.g., anaphylaxis). If reactions occur, staff should be prepared with procedures for their management. The table below describes procedures to follow if various reactions occur.

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#### REACTIONS  SYMPTOMS  MANAGEMENT

<table>
<thead>
<tr>
<th>Localized</th>
<th>Soreness, redness, itching, or swelling at the injection site</th>
<th>Apply a cold compress to the injection site. Consider giving an analgesic (pain reliever) or antihistronic (anti-itch) medication.</th>
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</thead>
<tbody>
<tr>
<td>Slight bleeding</td>
<td></td>
<td>Apply an adhesive compress over the injection site.</td>
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<tr>
<td>Continuous bleeding</td>
<td>Place thick layer of gauze pads over site and maintain direct and firm pressure; raise the bleeding injection site (e.g., arm) above the level of the patient’s heart.</td>
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#### Psychological fright and syncope (fainting)

- Fright before injection is given
- Extreme paleness, sweating, coldness of the hands and feet, nausea, light-headedness, dizziness, weakness, or visual disturbances

Have patient sit or lie down for the vaccination.

- Patient lie flat or sit with head between knees for several minutes. Loosen any tight clothing and maintain an open airway. Apply cool, damp clothes to patient’s face and neck.

#### Fall, without loss of consciousness

Examine the patient to determine if injury is present. Check the patient to determine if injury is present, and maintain an open airway. Apply cool, damp cloths to patient’s face and neck.

#### Loss of consciousness

Check the patient to determine if injury is present. Place patient flat on back. If patient does not recover immediately, check the patient for injury, and maintain an open airway. Apply cool, damp cloths to patient’s face and neck.

#### Anaphylaxis

Sudden or gradual onset of generalized itching, erythema (redness), or urticaria (hives); angioedema (swelling of the lips, face, or throat); severe bronchospasm (shortness of breath); abdominal cramping; or cardiovascular collapse.

See "Emergency Medical Management of Anaphylactic Reactions in Adults" for detailed steps to follow.

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**Visit www.immunize.org/catg.d/p3082.pdf**

Table describes procedures you can follow if various reactions occur.

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### Emergency medical protocol for management of anaphylactic reactions in adults

1. If itching and swelling are confined to the injection site where the vaccination was given, observe patient closely for the development of generalized symptoms.
2. If symptoms are generalized, activate the emergency medical system (EMS; e.g., call 911) and notify the patient’s physician. This should be done by a second person, while the primary healthcare professional assesses the airway, breathing, circulation, and level of consciousness of the patient.

#### Drug Dosing Information: The first-line and most important therapy in anaphylaxis is epinephrine. There are NO contraindications to epinephrine in the setting of anaphylaxis.

- **First-line treatment:** Administer aqueous epinephrine 1:1000 dilution intramuscularly, 0.01 mL/kg/dose (adult dose ranges from 0.3 mL to 0.5 mL, with maximum single dose of 0.5 mL).
- **Optional treatment:** H₁ antihistamines for hives or itching; you may also administer diphenhydramine (either orally or by intramuscular injection; the standard dose is 1–2 mg/kg every 4–6 hrs, up to 50 mg maximum single dose or hydroxyzine (standard oral dose is 0.5–1 mg/kg every 4–6 hrs, up to 100 mg maximum single dose).
- **Monitor the patient closely until EMS arrives. Perform cardiopulmonary resuscitation (CPR), if necessary, and maintain airway. Keep patient in supine position (flat on back) unless he or she is having breathing difficulty. If breathing is difficult, patient’s head may be elevated, provided blood pressure is adequate to prevent loss of consciousness. If blood pressure is low, elevate legs. Monitor blood pressure and pulse every 5 minutes.**
- **If EMS has not arrived and symptoms are still present, repeat dose of epinephrine every 5–15 minutes for up to 3 doses, depending on patient’s response.**
- **Record all vital signs, medications administered to the patient, including the time, dosage, response, and the name of the medical personnel who administered the medication, and other relevant clinical information.**
- **Notify the patient’s primary care physician.**

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**References**

- REFERENCES