

Table 4 ABCD Approach for Patient Evaluation and Treatment

A

Airway, oxygen

Assessment (severity and category of reaction); blood pressure and pulse (necessary);
electrocardiogram monitor may be necessary for evaluation of cardiac rhythm

Assistance (call for it)

Access (venous)-secure/improve intravenous line(s) – peripheral or central

B

Breathing (begin cardiopulmonary resuscitation [CPR] if necessary); use mouth
protective barrier

Bag-valve-mask (e.g., “Ambu” bag) or mouth-mask

Begin full resuscitation efforts (CPR) if necessary; call cardiopulmonary arrest response
team

Beware of atypical manifestation (e.g., beta-blockers may prevent tachycardic response)

C

Circulatory assistance: as appropriate, administer isotonic fluid (e.g., Ringer’s lactate,
normal saline), infuse rapidly, and may use pressure bag or forceful infusion

Categorize reaction and patient status

Call cardiopulmonary arrest response team if necessary; CPR; continue to monitor

Common denominators: assess cardiac output; capillary leak (third spacing); decreased
venous return, decreased peripheral vascular resistance; pulmonary edema

D

Drug therapies (Tables 5 and 6)

Do: monitor, assess, and reassure the patient; use correct dose (concentration) and route
for drugs; push intravenous fluids and oxygen

Don’t delay (call for help, if you need it); don’t use incorrect dose(s) and drugs