DIPHENHYDRAMINE [BENADRYL]

DRUG CLASSIFICATION	First-Generation H_1 Receptor Antagonist Competitive Muscarinic Acetylcholine Antagonist Antihistamine Agent
MECHANISM OF ACTION	Competes with histamine for H1-receptor sites located on effector cells of the respiratory smooth muscle, vascular endothelial tissue, gastrointestinal tract tissue, cardiac tissue, immune tissue, and central nervous system (CNS) neurons. Acts as an inverse agonist at the H1 receptor, reversing the effects of histamine on capillaries and reducing symptoms of allergic reaction. Readily crosses blood-brain barrier and inversely agonizes the H1 CNS receptors, resulting in drowsiness and medullary cough center suppression.
CLINICAL INDICATIONS	Mild-to-Moderate Allergic Reaction Extrapyramidal Reaction
STANDARD CONTRAINDICATIONS	Hypersensitivity to Diphenhydramine or Structurally-Related Antihistamines Neonates and Premature Infants Breastfeeding Mothers
POTENTIAL ADVERSE EFFECTS	Anticholinergic or Antimuscarinic Effects **/** Drowsiness **/** Fatigue **/** GI-Discomfort **/** Hypotension **/** Tachycardia
GENERAL RISKS & PRECAUTION	**1)** Use with caution in the presence of moderate-to-severe hypertension. **2)** Use with extreme caution in patients with a chronic history of asthma, cardiovascular disease, or thyroid dysfunction. **3)** Closely and consistently monitor recipients for signs and symptoms of CNS depression and nervous system agitation. **4)** Diphenhydramine overdose may produce significant signs of toxicity such as severe agitation, dry mucous membranes, flushed skin, elevated body temperature, blurry vision, tachyarrhythmias, rhabdomyolysis, etc. **5)** Diphenhydramine should NOT be given to a patient with decreased mental status and/ or a hypotensive patient as this may cause nausea, vomiting, and/ or worsening mental status. **6)** In anaphylaxis, Diphenhydramine may decrease mental status.
PROTOCOL INDEX	Allergic Reaction / Anaphylaxis (AM-1) Pediatric Allergic Reaction (PM-1) Behavioral Health Crisis (UP-17)

MEDICATION ADMINISTRATION

ADULT	PEDIATRIC
Mild-to-Moderate Adult Allergic Reaction 25 – 50 mg [IV/IO/IM/PO]	**Mild-to-Moderate Pediatric Allergic Reaction** 1 mg/kg [IV/IO/IM/PO]; (Maximum 50 mg)
Extrapyramidal Reactions – See UP-17 Pearls 50 mg [IV/IO/IM/PO]	**Extrapyramidal Reactions – See UP-17 Pearls** 1 mg/kg [IV/IO/IM/PO]; (Maximum 50 mg)