DIPHENHYDRAMINE (Benadryl)
EMSAC AUGUST 2026

ACTION (Antihistamine)

- Antagonizes effects of histamine blocking the effects of histamine release including vasodilation, incrased vascular permeability, bronchoconstriction and pruritis. ~~in allergy.~~
- ~~Decreases itching, edema, bronchoconstriction, and vasodilation.~~
- Antagonizes acetylcholine receptors, helping with nausea and ~~resulting in resolution of~~ treating ~~-~~dystonia associated with ~~caused by~~ antipsychotic medications (e.g. droperidol).

INDICATIONS

- **Allergic Reaction & Anaphylaxis**
- Extrapyramidal symptoms including antipsychotic-induced dystonia
- ~~Nausea~~

CONTRAINDICATIONS

- Known ~~hypersensitivity~~ allergy to diphenhydramine

PRECAUTIONS

- Nursing/lactating patients ~~Relative contraindication in pregnant or lactating females~~
- Elderly patients are at higher risk for adverse effects including excessive sedation
- With other CNS sedating medications, may have synergistic effect

POTENTIAL SIDE EFFECTS

- Drowsiness and sedation
- Hypotension
- Palpitations
- ~~Potentiation of other CNS depressants~~
- Tachycardia
- Headache or blurred vision
- Anticholinergic effects

ADULT DOSE/ROUTE

→25 – 50 mg IVP/IO/IM

PEDIATRIC DOSE/ROUTE (≤ 14 years of age, ≤ 40 kg, whichever comes first)

→ 1 mg/kg IVP/IO/IM (max dose ~~25~~ 50 mg)

NOTES

- In anaphylaxis, do NOT delay administration of epinephrine; administer diphenhydramine after epinephrine

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INDICATION	ADULT	PEDIATRIC
1. **Anaphylaxis** 2. Other **allergic reaction** 3. **Extrapyramidal symptoms,** including antipsychotic-induced dystonia	25 – 50 mg IVP/IO/IM IM preferred if perfusing well. IV preferred if anaphylaxis or other severe allergic reaction.	1 mg/kg IVP/IO/IM up to 25 mg IM preferred if perfusing well. IV preferred if anaphylaxis or other severe allergic reaction.