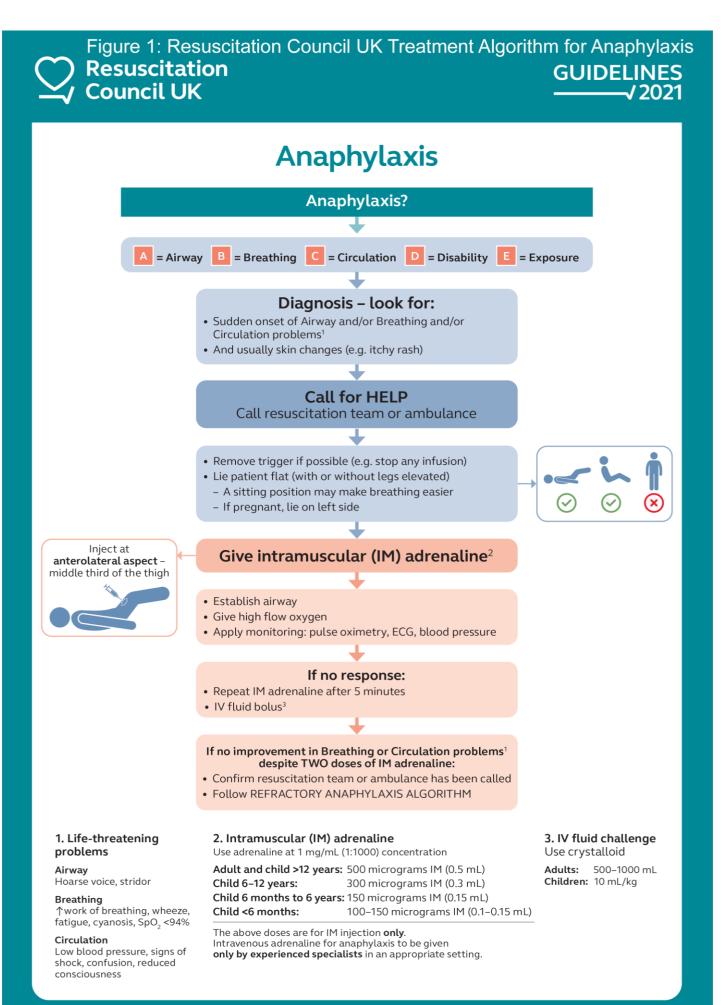
Anaphylaxis In Adults - Summary Clinical Guideline

Reference no.: CG-T/2023/011

Anaphylaxis is a potentially life threatening reaction which usually occurs in response to exposure to an allergen against which the patient has IgE antibodies. Symptoms evolve within minutes to a few hours of exposure and can be rapidly progressive. The Resuscitation Council UK treatment algorithm below shows how to recognise and treat anaphylaxis. **SEE ACCOMPANYING SUMMARY CLINICAL GUIDELINE FOR MANAGEMENT OF <u>REFRACTORY ANAPHYLAXIS</u> IN ADULTS.**

Note that in anaphylaxis caused by insect stings or drugs, shock may be the main presenting feature. Please refer to the full clinical guideline for further management, including tryptase measurement, adrenaline auto-injector prescription, safe discharge and referral to the Adult Allergy Clinic.



Reference no.: CG-T/2014/011



Suspected Anaphylaxis Referral Form (Adults)*

| *Anaphylaxis caused exclusively by a drug should be |
|---|
| referred to a regional drug allergy clinic |
| (QMC/Glenfield/Birmingham Heartlands). DO NOT refer |
| to general allergy clinic. Please see guidelines. |

| Patient | nar | ne | : | | | | | | | | | | | | | | | | ••• | ••• | | | | |
|---------|-----|-----|---------|------|-------|-----|-----|-----|-------|-----|-----|-------|-----|-----|-----|-----|-------|---|-----|-----|-----|-----|---|---|
| ID/NHS | nu | mb | er | : | ••• | | | | | | ••• | • • • | | | | | | • | | | | | | |
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| Date of reaction: | Referral source: |
|--------------------------------|------------------|
| Symptoms and clinical signs: | |
| | |
| | |
| Emergency treatment delivered: | |
| | |
| | |

Possible trigger (state if unknown):

| Management of patients meeting criteria for Suspected Anaphylaxis | Tick when complete |
|---|--------------------|
| Tryptase sample on arrival* | |
| Second tryptase sample 1-2 hours later* | |
| Adrenaline auto-injector x2 dispensed | |
| Advice and guidance given (see below) | |
| *not later than 4 hours post reaction | |

Advice on Discharge for Patients with Suspected Anaphylaxis

- 1. Explain the symptoms of anaphylaxis
- 2. Provide the patient with <u>two</u> adrenaline auto-injectors (<u>unless certain anaphylaxis was exclusively</u> <u>due to a drug reaction</u>)
- 3. Show them how to use it and signpost to company on-line training videos
- 4. When to use it (wheeze, SOB, throat closure, feeling faint, abdominal pain or vomiting in presence of other allergic symptoms)
- 5. What to do if anaphylaxis occurs (print appendix 2: MHRA "Correct use of your AAI" leaflet)
- 6. Risk of a biphasic reaction
- 7. Trigger avoidance if relevant
- 8. Offer referral to RDH Allergy clinic and advise them of the following patient support group: Anaphylaxis UK (http://www.anaphylaxis.org.uk/)

Please email a completed referral to dhft.RespiratorySecretaries@nhs.net or send in the post to the Respiratory Secretaries, Medicine Office Suite A, Off Ward 408, Level 4, RDH. Burton site referrals: please enclose copies of the ED notes and ambulance paperwork. Referrals without adequate clinical information will be returned.