

## Summary of NICE Guidelines

Title	Anaphylaxis
NICE Reference	CG134
Date of Review:	24/01/2013
Date of Publication	December 2011
Summary of Guidance (Max 250 words)	<p>Upon admittance, time of reaction-onset, acute clinical features of reaction and circumstances immediately before reaction-onset should be recorded to help identify possible triggers.</p> <p>In adults/young people (16–18 y), timed blood samples should be drawn for mast cell tryptase testing immediately after emergency treatment followed by a second sample within 1–2 hr (<math>\leq</math> 4 hr). A 6–12 hr observation period following reaction-onset should be conducted (response-dependent). In fast, readily controlled responses a reduced observation period is appropriate providing patients receive suitable post-reaction care before discharge.</p> <p>In children (&lt;16 y), blood samples for mast cell tryptase testing should only be drawn (timings detailed above) if the trigger is suspected to be venom-/drug-related or idiopathic. Any child receiving emergency treatment for suspected anaphylaxis should be admitted under the care of a paediatric medical team.</p> <p>After emergency treatment, a referral to a specialist allergy service should be made for investigation, diagnosis, monitoring and management. An appropriate adrenaline injector should be offered as an interim measure before the appointment. Advise that a blood sample may be required at follow-up with the allergy service to measure baseline mast cell tryptase.</p> <p>Before discharge, advice and information should be offered regarding signs, symptoms and potential triggers (and avoidance if known) of an anaphylactic reaction, the risks of a biphasic reaction, appropriate action if another anaphylactic reaction occurs (use of adrenaline injector/call emergency services), the correct use of the adrenaline injector, the referral to a specialist allergy service/the referral process and information about patient support groups.</p>
Impact on Lab (See below)	<input checked="" type="checkbox"/> None <input type="checkbox"/> Moderate <input type="checkbox"/> Important
Lab professionals to be made aware	<input type="checkbox"/> Laboratory Manager <input type="checkbox"/> Chemical Pathologist <input type="checkbox"/> Clinical Scientist <input type="checkbox"/> Biomedical Scientist
Please detail the impact of this guideline (Max 150 words)	This NICE guideline has no impact on the provision of current laboratory services: recommended actions of blood samples taken during emergency admittance or during follow-up after referral to a specialist allergy service, would be processed under current laboratory turnaround times.

### Impact on Lab

**None:** This NICE guideline has no impact on the provision of laboratory services



**Moderate:** This NICE guideline has information that is of relevance to our pathology service and may require review of our current service provision.

- **Important:** This NICE guideline is of direct relevance to our pathology service and will have a direct impact on one or more of the services that we currently offer.