Request form for suspected anaphylaxis during anaesthesia
Immunology Lab, 1ST Floor, Laboratory Medicine and Facilities Management Building, QUEEN ELIZABETH UNIVERSITY HOSPITAL, Govan Road, Glasgow G51 4TF
Enquiries: 0141 347 8872 or ext 68872

Hospital No:
Chi No:
Name:
Dob:
Hospital:
Location for report:
Consultant:
Bleep/Contact No:

Sample Details
Mark date & time clearly on bottles – 3 timed samples
Record the time between onset of reaction and blood test
External laboratories - send clotted blood to Biochemistry.
If not possible to separate and send within 3 days of venepuncture, freeze at –20°C and send to Immunology next working day. Always include a copy of this form with samples.

<table>
<thead>
<tr>
<th>Sample</th>
<th>Ideal time after onset of reaction</th>
<th>Actual time of sample Date</th>
<th>Actual time interval from onset to blood test</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sample 1</td>
<td>Immediately after resuscitation</td>
<td></td>
<td>mins/hours</td>
</tr>
<tr>
<td>Sample 2</td>
<td>1-2 hours (or ASAP after this)</td>
<td></td>
<td>mins/hours</td>
</tr>
<tr>
<td>Sample 3</td>
<td>~24 hours</td>
<td></td>
<td>hours</td>
</tr>
</tbody>
</table>

Tick if exposed to any of the following prior to reaction
Penicillin ☐ Cephalosporin ☐ Suxamethonium ☐
Ampicillin ☐ Chlorhexidine ☐
Amoxicillin ☐ Protamine ☐

Pre-reaction sample – if available please arrange for this to be sent to Immunology

Details of Reaction:
Helpful information includes nature of reaction, possible causes (eg drugs, colloid, skin prep, antibiotics, latex exposure etc prior to onset of reaction), relevant PMH.

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IFORM038
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Anaesthetic and other reactions: Information

Timing of Samples – MARK DATE AND TIME ON BLOOD BOTTLES
A series of samples is requested to ‘capture’ the peak tryptase level (usually in first 2 hours) and the baseline for comparison and to help identify underlying mast cell disorders. The half-life of tryptase is ~2-3 hours and it is relatively stable in blood. Where possible send the following samples
1. Immediately after resuscitation (eg ~30-60 mins)
2. 1-2 hours after onset (or ASAP after this)
3. Baseline – approx 24 hours after onset eg next day
In addition to tryptase, other tests will be done - complement (for anaphylactoid reactions to plasma expanders), IgG (to give indication of degree of haemodilution), IgE to latex and other allergens as indicated by the information given on the form, subject to availability. Results are usually available within 2-4 weeks.

Interpretation of results
High tryptase levels usually indicate anaphylactic/toid reactions but skin testing is generally required to identify the cause. If baseline tryptase is also raised, consider mast cell disorder. Normal tryptase levels and negative specific IgE results do NOT exclude allergic reactions.

Clinic Referral (NB this form is NOT a clinic referral form)
Consider referral if anaphylactic/toid reaction during general anaesthesia is suspected, irrespective of results. Refer West of Scotland patients to Dr M Shepherd, Regional Anaphylaxis Service, West Glasgow Ambulatory Care Centre, Dalnair St, Glasgow, G3 8SJ.
Please include:
- Description of the reaction and time of onset in relation to drugs given
- Photocopy of the anaesthetic chart
- Photocopy of drug charts
This request form is NOT a clinic referral form.

Scoline Apnoea / Family History of Anaesthetic Problems
Clinical picture is of prolonged action of suxamethonium. Within GGC, request ‘cholinesterase’ on trakcare. Outwith GGC, discuss with local biochemistry laboratory.
NB - need to delay testing for at least 2 days after a reaction.

Angioedema / C1 inhibitor deficiency / Family History of Anaesthetic Problems
Clinical picture is of peripheral, abdominal or laryngeal angioedema. Minor trauma may trigger local angioedema eg laryngeal oedema following intubation. This can be the presenting feature. Pre-operative prophylaxis is usually recommended for known patients – contact immunology. Send clotted blood to Immunology for ‘C3, C4 and C1 inhibitor levels’.

Further information
Clinical Immunologist - Dr M Thomas / Dr Sai Murng 0141 232 7693 (ext 67693)
Regional Anaphylaxis Service - Dr M Shepherd, 0141 201 0390 (ext 80390)

BSACI guidelines for the investigation of suspected anaphylaxis during anaesthesia were published in Clinical & Experimental Allergy 2010 (40) 15-31