**LETTER TO THE PATIENT FOLLOWING PERIOPERATIVE ANAPHYLAXIS**

[Hospital header] Date …………………..

Patient's name ......................................................

Patient’s address ................................................................

Medical record number ……………………………….

NHS Number ………………………………..….....

Dear .......................................................................

**You had a suspected severe allergic reaction (anaphylaxis) during anaesthesia on** ......................

To find out the cause of the reaction I will refer you to the anaesthetic allergy clinic at:

..................................................................

They will contact you with an appointment - this normally takes a few weeks.

* *If you have not heard in six weeks, or if you have any queries, please contact me (details below).*
* *It is important you attend the allergy clinic to prevent a further severe allergic reaction.*

Until you have attended the allergy clinic, you should avoid all the drugs and other potential causes you were exposed to during the hour prior to the allergic reaction. These include:

1) Latex

2) Chlorhexidine, including medical, dental and household products

3) Anaesthetic drugs (SPECIFY) ……………………………………..

 ……………………………………..

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 ……………………………………..

 ………………………………………

 ……………………………………..

4) Antibiotics (SPECIFY) ……………………………………..

 ……………………………………..

5) Analgesics (SPECIFY) ……………………………………..

 ……………………………………..

6) Other drugs/substances (SPECIFY) ……………………………………..

 ……………………………………..

It is important that you show this letter if you have any medical appointments between now and the time of your clinic appointment

I will write to your GP with this information.

Yours sincerely,

**Consultant Anaesthetist** Contact phone number………………………………….