**ANAESTHETIC ANAPHYLAXIS INVESTIGATION PACK CHECKLIST**

This pack contains:

1. Instructions on taking three timed blood samples for mast cell tryptase.
2. Template for letter to be given to the patient.
3. Urgent-surgery management plan.
4. Template for letter to be sent to the GP.
5. Referral form to be sent to the allergy clinic.

**MAST CELL TRYPTASE SAMPLES**

* It is the anaesthetist's responsibility to ensure the samples are taken, including the 24-hour sample.
* Use tubes for serum sample, eg. electrolytes (colour coding varies between hospitals). Ensure you date and time the tubes. There is no need to refrigerate the samples.
  + 1st sample – as soon as the patient is stable. (Ideally less than 30 mins)
  + 2nd sample – as close to 1–2 hours as possible after the event. (No more than 6 h)
  + 3rd (baseline) – at least 24 hours after the event.
* Phone your local lab (usually Immunology) when you have taken the 2nd sample so they expect a group of 3 samples.

**COMMUNICATION AND FOLLOW-UP**

* Refer to critical care for continuing care of the patient.
* Record full details of the anaphylaxis and resuscitation in the patient's medical record.
* Explain to the patient what has happened as soon as practicable and record your conversation in the medical record. Give the patient the completed **Patient Letter**.
* Ensure the event is reported to your local incident reporting system.
* Contact your Departmental Lead for Perioperative Anaphylaxis for advice.
* If postponed surgery is urgent, refer to the **Urgent Surgery Management Plan.**
* Complete all parts of the **Allergy Clinic Referral Form** and send *together with photocopies of anaesthetic record and other relevant documentation*.
* Inform the patient's GP using the **GP Letter**.
* Ensure the event is reported to the MHRA through the Yellow Card system and keep a note of the MHRA Reference Number to update with the Allergy Clinic diagnosis.
* Ensure the patient is followed up for adverse physical and/or psychological effects.