

Children's Wisconsin

Co-Management Guidelines

To support collaborative care, we have developed guidelines for our community providers to utilize when referring to, and managing patients with, the pediatric specialists at Children's Wisconsin. These guidelines provide protocols for jointly managing patient cases between community providers and our pediatric specialists.

Peanut Oral Immunotherapy

Guideline for providers seeing peanut allergic patients/families who are interested in pursuing therapy.

Diagnosis/symptoms	Referring provider's initial evaluation and management:	When to initiate referral/consider refer to Allergy Clinic:	What can referring provider send to Allergy Immunology Clinic?	Specialist's workup will likely include:
<p>Signs and symptoms</p> <ul style="list-style-type: none"> -Peanut allergy will be present with symptoms of IgE-mediated reaction -Can range from mild symptoms to severe anaphylaxis -Clinical features can include: <p>Dermatologic - Pruritus, flushing, urticaria/angioedema, diaphoresis</p> <p>Ophthalmic - Conjunctival injection, lacrimation, periorbital edema, pruritus</p> <p>Respiratory - Nose/oropharynx (sneezing, rhinorrhea, nasal congestion, oral pruritus, metallic taste), upper airway (hoarseness, stridor, sense of choking, laryngeal edema), lower airway (dyspnea,</p>	<p>Diagnosis and Treatment</p> <ul style="list-style-type: none"> -Diagnosis can be suspected based on clinical features alone -Often confirmation is performed in the Allergy Clinic -Management consists of: <ol style="list-style-type: none"> a) avoidance of the allergen (avoid peanut in the diet) AND b) use of rescue medications when needed in the event of accidental ingestion <p>There is a new treatment that is now offered through Children's Wisconsin. It is only for peanut.</p> <ul style="list-style-type: none"> -treatment is called OIT -it is not a cure 	<p>Patients should be referred if they meet any of the following criteria:</p> <ul style="list-style-type: none"> -they express interest in pursuing oral immunotherapy -want to learn more about potential "pro-active" approaches for food allergy -are highly anxious about living with their food allergy -highly motivated to have more freedom from their allergy -otherwise deemed necessary per clinical discretion <p>NOTE: peanut OIT is currently approved for ages 4-17 years</p>	<p>Internal Provider using Epic:</p> <ul style="list-style-type: none"> • Place Ambulatory Referral to AAI <p>External Provider using EPIC:</p> <ul style="list-style-type: none"> • Please send external referral order to CHW ASTHMA ALLERGY CLINICS • Or fax to 414/607-5288 <p>In order to help triage our patients maximize the visit It would also be helpful to include:</p> <ul style="list-style-type: none"> • Chief complaint, onset, frequency • Recent progress notes • Urgency of the referral • Labs and imaging results • Other Diagnoses • Office notes with medications tried/failed in the past and any lab work that may have 	<p>After referral to the Allergy Clinic:</p> <ul style="list-style-type: none"> -peanut allergy can be confirmed -interest in OIT can be gauged -If family wants more information, then a "pre-enrollment" discussion will be scheduled by Allergy Clinic -If OIT is pursued, then Allergy team will take care of all of the arrangements and communicate with referring provider



<p>tachypnea, wheezing, cough, cyanosis) Cardiovascular - Conduction disturbances, tachycardia, bradycardia (if severe), arrhythmias, hypotension, cardiac arrest Gastrointestinal - Nausea/vomiting, abdominal cramping, bloating, diarrhea Neurologic - Sense of impending doom, syncope, dizziness, seizures</p> <p>When suspected, the allergy can be confirmed by allergy testing showing positive skin prick test, positive serum IgE test, or both</p>	<p>-aims to desensitize someone to the allergenic food -follows a protocol of consuming small doses of peanut every day under close monitoring from the treating allergist</p>		<p>been obtained regarding this patient's problems.</p>	
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Medical Disclaimer

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