**Referral for supervised Covid-19 vaccination**

**Section A: Referring clinician to complete (all blue sections)**

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| **Patient details:** |
| Surname:  | NHS No:  |
| Forename:  | Date of birth:  |
| Address:  | Contact number:  |
| Language of choice:  |
| Communication/understanding difficulties? Yes / NoDetails:  |
| **Referring clinician details**  |
| Name:  | Email:  |
| GP surgery:  | Phone number:  |
| Referral date:  |

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| **Indication for referral: Prior to first vaccination** |
|  | History of immediate anaphylaxis (<2 hours) to multiple (2 or more) different drug classes, with the trigger unidentified |
|  | History of anaphylaxis to a vaccine, injected antibody preparation or a medicine likely to contain PEG (e.g. depot steroid injection, laxative) |
|  | History of idiopathic anaphylaxis that has not been investigated by Immunology service |
|  | Individuals with known history of immediate onset (<2 hours), systemic reaction to any component of the Covid-19 vaccine (e.g. Pfizer (PEG), AstraZeneca (Polysorbate 80, L-histidine)) |

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| **Details of reaction** |
| Name of medication(s)(If indication is idiopathic anaphylaxis, include frequency of episodes here) |  |
| Clinical features of reaction |  Rash Angioedema Dyspnoea Wheeze Light headedness Collapse Nausea/vomiting |  Diarrhoea Rhinorrhoea Sneezing Other:     |
| Time between vaccine exposure and symptoms |  mins / hours / days |
| Was the patient treated in hospital? | Yes / No |
| Observations during acute reaction |  HR: bpm BP: mmHg O2sats: % |
| What treatment was required? |  Antihistamines:  Corticosteroids:  Adrenaline:  Other:  |

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| **Indication for referral: Reaction after 1st vaccination** |
|  | Immediate onset (<2 hours), systemic reaction (e.g. urticaria, angioedema) to first dose of any Covid-19 vaccine **without** features of anaphylaxis |
|  | Immediate onset (<2 hours), systemic reaction to first dose of any Covid-19 vaccine **with** features of anaphylaxis (e.g. hypotension, collapse, shortness of breath, required adrenaline) |

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| **Details of reaction** |
| Date of vaccination |  |
| Name of vaccine | AstraZeneca / Pfizer / Moderna |
| Clinical features of reaction |  Rash Angioedema Dyspnoea Wheeze Light headedness Collapse Nausea/vomiting |  Diarrhoea Rhinorrhoea Sneezing Other:     |
| Time between vaccine exposure and symptoms |  mins / hours / days |
| Was the patient treated in hospital? | Yes / No |
| Observations during acute reaction |  HR: bpm BP: mmHg O2sats: % |
| What treatment was required? |  Antihistamines:  Corticosteroids:  Adrenaline:  Other:  |
| Acute tryptase taken? | Yes / No |

**Section B: Triaging clinician/Immunology department to complete**

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| **Triage outcome** |
| Proceed to Vaccination plan (below) | Yes / No |
| Insufficient details(return to referring clinician) | Reason:   |

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| **Vaccination plan** |
| Vaccination setting | Community setting (e.g. GP surgery) Yes / No |
| Enhanced supervised setting Yes / No |
| For enhanced supervised setting, the referring clinician should contact appropriate centre belowNewcastle upon Tyne NHS FT* covers Gateshead, North Tyneside, Northumbria and Newcastle
* Dr Ashley Price
	+ Infectious disease consultant
	+ david.price15@nhs.net

Country Durham and Darlington NHS FT* Rachel Smith
	+ Deputy chief pharmacist
	+ rachel-e.smith@nhs.net

Country Durham CCG* Dr James Carlton
	+ Medical director
	+ jamescarlton.ddes@nhs.net

South Tyneside and Sunderland NHS FT* Dr Paul McAndrew
	+ Deputy Medical Director, Consultant in Anaesthetics & Intensive Care Medicine
	+ paul.mcandrew@nhs.net

South Tees Hospitals NHS FT* Dr Andrew Maund
	+ Clinical Lead South Tees Vaccination Hubs
	+ bookings via: pam.willis1@nhs.net
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| Suitable vaccine | AstraZeneca: Yes / NoPfizer: Yes / NoModerna: Yes / No |
| Premedication |  Not required Cetirizine 10mg given 30mins before dose |
| Additional advice |    |

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| **Triage completed by** |
| Name:  | Date:  |