

Paediatric Allergy Specialist Clinics at Western Health:

Western Health provides a Specialist Clinic for patients up to 17 years of age who require assessment and management of allergy/allergic conditions. Patients will be triaged by Consultant Paediatrician into management pathways according to specific clinical requirements:

These referral guidelines are for Paediatric Specialist clinics provided at Joan Kirner Women's and Children's at Sunshine Hospital only.

Referrals may be triaged to alternative Paediatric Specialist Clinics at Western Health.

Conditions not seen by Paediatric Allergy Specialists at Western Health:

- Medication or latex allergies - Refer to the Allergy Department at the Royal Children's Hospital via [RCH Specialist Clinics Referrals](#).
- Children with a family history (parent and/or sibling) of food allergy
- Food intolerances
- Large local reactions to mosquito bites
- Acute idiopathic urticaria
- Suspected Primary Immunodeficiency Disease (PID)
- Suspected Auto inflammatory disease.

REFERRALS THAT MAY BE ACCEPTED FROM A PAEDIATRICIAN or other SPECIALIST:

- Chronic idiopathic urticaria
- Eczema.
- Asthma.
- Allergic rhinitis.
- Allergic proctocolitis.

Paediatric Allergy Alarm Symptoms:

Acute conditions requiring immediate assessment – please refer the patient to the Sunshine Hospital Emergency Department.

- Confirmed / suspected anaphylaxis

Access & Referral Priority Paediatric Allergy:

The clinical information provided in your referral will determine the triage category. The triage category will affect the timeframe in which the patient is offered an appointment.

<p style="text-align: center;">URGENT</p> <p style="text-align: center;">Appointment timeframe 30 days</p>	<p style="text-align: center;">ROUTINE</p> <p style="text-align: center;">Appointment timeframe greater than 30 days, depending on clinical need.</p>
<p>New Onset Anaphylaxis</p> <ul style="list-style-type: none"> All children up to 17 years of age. <p>Note: Some patients may be triaged to be seen within 90 days if appropriate management plans are clearly identified as already in existence.</p>	<p>Other Suspected IgE Mediated Food Allergy</p>
<p>New Food Allergy (not anaphylaxis)</p> <ul style="list-style-type: none"> Children < 12 months of age allergic to: <ul style="list-style-type: none"> ➢ Milk, Wheat, Peanut, Egg, Tree nuts. Children up to 17 years of age referred by a Paediatrician with concern that their food allergies may be having significant impact on nutrition, growth or eating behaviors. 	<p>Food Protein-Induced Enterocolitis Syndrome (FPIES)</p> <p>Eosinophilic Esophagitis (EOE)</p> <p>Allergic Proctocolitis/non-IgE Mediated Allergy</p> <ul style="list-style-type: none"> Children < 12 months of age, or Referral from a General Paediatrician
	<p>Insect Allergies</p>
	<p>Positive Food Serum Specific IgE / Skin Prick Test</p> <ul style="list-style-type: none"> Positive test of unclear significance
	<p>Severe Eczema</p> <ul style="list-style-type: none"> Referral from a General Paediatrician or Dermatologist
	<p>Asthma or Allergic Rhinitis</p> <ul style="list-style-type: none"> Poorly controlled, severe asthma or allergic rhinitis referred by a Paediatrician or ENT
	<p>Chronic Urticaria</p>
	<p>Recurrent Angioedema without Urticaria</p>

Condition Specific Referral Guidelines:

Key information enables Western Health to triage patients to the correct category and provide treatment with fewer visits to specialist clinics, creating more capacity for care. If key information is missing, you may be asked to return the referral with the required information.

Condition:	Key Information Points:	Clinical Investigations
Anaphylaxis	<ul style="list-style-type: none"> History of onset including time from exposure Symptoms experienced. Suspected trigger Treatment provided and response Details of adrenaline prescribed. Details of any family history of allergy or anaphylaxis 	<ul style="list-style-type: none"> Previous Skin Prick Testing and/or Serum Specific IgE result
Allergies	<ul style="list-style-type: none"> History of onset including time from exposure. Symptoms experienced. Suspected trigger Treatment provided and response 	<ul style="list-style-type: none"> Previous Skin Prick Testing and/or Serum Specific IgE result
Food Protein-Induced Enterocolitis Syndrome (FPIES)	<ul style="list-style-type: none"> History of onset including time from exposure Suspected trigger/s Treatment provided and response 	
Eosinophilic Esophagitis (EOE)	<ul style="list-style-type: none"> Presenting symptoms including reflux, previous episodes of food impaction/choking. Other allergic co-morbidities 	<ul style="list-style-type: none"> Previous gastroscopy reports and histology
Eczema	<ul style="list-style-type: none"> History of onset Treatment tried to date including bleach baths and/or antibiotics. Current treatment 	
Asthma or Allergic Rhinitis	<ul style="list-style-type: none"> History of onset Treatments provided and response. Current medications 	
Allergic Proctocolitis/non-IgE Mediated Allergy	<ul style="list-style-type: none"> History of onset including presence of blood and/or mucous Suspected triggers Impact on growth parameters Maternal dietary avoidance or current formula use 	
Recurrent Angioedema without Urticaria	<ul style="list-style-type: none"> Past medical history/comorbidities Family history of angioedema if applicable 	