

be managed in a **latex-free environment**. Take care that they do not come in direct or secondary contact with products or equipment containing latex at *any time* during medical treatment. Allergy testing can identify latex sensitivity with varying success. Skin prick testing and provocation testing carry the risk of allergic reaction or anaphylaxis. Several commercially available assays can be useful in confirming latex sensitivity. To date, none of these tests demonstrates complete diagnostic reliability, and they should not be the sole determinant of the presence or absence of an allergic response to latex.

## Nursing Care Guidelines

### Identifying Latex Allergy

- Does your child have any symptoms, such as sneezing, coughing, rashes, or wheezing, when handling rubber products (e.g., balloons, tennis or Koosh balls, adhesive bandage strips) or when in contact with rubber hospital products (e.g., gloves, catheters)?
- Has your child ever had an allergic reaction during surgery?
- Does your child have a history of rashes; asthma; or allergic reactions to medication or foods, especially milk, kiwi, bananas, or chestnuts?
- How would you identify or recognize an allergic reaction in your child?
- What would you do if an allergic reaction occurred?
- Has anyone ever discussed latex or rubber allergy or sensitivity with you?
- Has your child had any allergy testing?
- When did your child last come in contact with any type of rubber product? Were you present?

Modified from Romanczuk A: Latex use with infants and children: it can cause problems,