

Latex Allergy

Site Applicability

VGH UBCH GPC GFS MPAP

Background Information

Hypersensitivity to natural rubber latex has recently become a health problem. Reactions following exposure vary anywhere from skin irritation through to full-blown anaphylaxis. Latex allergy is particularly prevalent in patients with spina bifida (28-67%) but is also common in health care workers (8-17%). Medical devices, principally latex gloves are the largest single source of exposure to the potent allergens. Exposure to bioavailable allergen may be by direct contact with an offending device or by inhalation of allergen carried by cornstarch powder with which most powdered gloves are coated. The goal when caring for these patients is to create a latex-safe environment, ie. one in which the presence/exposure to latex antigens is minimized.

Directive / Policy / Standard

All ambulatory and inpatients are to be screened for the presence of a latex allergy and appropriate precautions implemented when a latex allergy is suspected or confirmed. Full latex precautions are to be implemented for all patients with spina bifida.

Procedure / Recommendations / Assessment:

Upon admission prior to taking vital signs:

1. Screen all patients by asking the following questions:
"Have you experienced a rash, swelling, itching, nose or eye irritation or shortness of breath after contact with rubber gloves, a rubber dam during dental work, balloons, condoms, erasers or other rubber or latex products?"

IF the patient answers YES, notify the physician, and implement:

- a. **Mucosal Latex Precautions-** if the patient has had a localized reaction such as a rash, or hives with direct contact with latex

OR

- b. **Full Latex Precautions** - if the patient has had a history of any of the following after direct contact/exposure to latex
 - throat constriction
 - bronchospasm
 - low blood pressure
 - asthma
 - generalized swelling prominent
 - rhinoconjunctivitis

NOTE: This is a controlled document. A printed copy may not reflect the current, electronic version on the VCH Intranet. Any documents appearing in paper form should always be checked against the electronic version prior to use. The electronic version is always the current version. This CPD has been prepared as a guide to assist and support practice for staff working at Vancouver Acute. It is not a substitute for proper training, experience and the exercise of professional judgment. Please do not distribute this document outside of VCHA without the approval of the VCH Office of Professional Practice.

2. Document the allergy.
3. Place red allergy band on the patient identifying type of latex allergy precautions.
(Latex Allergy: Mucosal precautions or Latex Allergy: Full Latex Precautions)
4. Obtain latex free box.
 - At VGH & GPC order from the Splint Room.
 - At UBCH - order from Stores.

Note: Ambulatory Care areas, Operating Rooms and Diagnostic Areas are responsible for creating, maintaining and storing a "Latex-free Box"/Cart with appropriate supplies/equipment for their patients.

5. Review contents of the latex free box (Refer to [Appendix 1](#)).
6. Keep box at patient's bedside. Exception: On the psychiatric units, keep the box at the nursing station.
7. Review and post appropriate latex precaution sign (found in box) on the bed and door of patient's Room. (Refer to Table 1 & Table 2)

Table 1

LATEX ALLERGY	
Localized Reaction: Use Mucosal Latex Precautions	
<ul style="list-style-type: none"> • Use latex free gloves as required for patient care • Use JJ Critikon Blood Pressure Cuff and accessories. • Use silicone foley catheter for intermittent or indwelling • Catheterization • Use Dermicel (Silk), Micropore (Paper) or Opsite to tape IV • access and tubes • Use non-latex suction catheters • Use Opsite or Tegaderm for dressings • Keep Latex Allergy box at bedside (exception: Psychiatry - keep at Nursing Station) • No balloons in room • See Patient Care Guideline - L-040 	

8. Notify receiving departments of the patient's latex allergy status whenever the patient is been sent for diagnostic testing or being transferred to another unit.
9. When possible, any patient on Full Latex Precautions is to be booked as the first OR for the day (when aerosolized latex may be at lowest rate during the day).

Table 2

LATEX ALLERGY Systemic Reaction: Use Full Latex Precautions	
<ul style="list-style-type: none"> Keep patient in single room. If unable, use latex free gloves whenever using gloves in the care of all the patients in the room. Use latex free gloves as required for patient care Wash hands & wear a clean gown when entering room No balloons in room Use JJ Critikon Blood Pressure Cuff and accessories Use Silicone foley catheter for intermittent or indwelling catheterization Use Dermicel (Silk), Micropore (Paper) or Opsite to tape IV access and tubes Use Opsite or Tegaderm for dressings Use non-latex suction catheters See Patient Care Guideline L-040 	
Patient has a history of Anaphylaxis <input type="checkbox"/> Yes <input type="checkbox"/> No	
<ul style="list-style-type: none"> If Yes: Patient must be in a single room 	

FOR FULL LATEX PRECAUTIONS: Preparation of Medications:

A. Vials

- remove the rubber stopper and discard. Do not puncture the rubber stopper of the vial at anytime.
- The following vials do not contain Latex in their stoppers - Abbott brand sterile water for injection and sodium chloride 0.9% - 10 ml vials , hydrocortisone (A- Hydrocort®, Solu-Cortef®, Novopharm®), methylprednisolone (Novopharm®, Solu-Medrol®) and Ativan®

RESOURCE PERSONS:

Products:

Cliff Hall: Coordinator of Equipment & Supplies, Purchasing Department:

Pager 871-0707; Telephone 331-8942.

Respiratory Therapy

Pager 870-3444

Medical Care:

Anaesthetist - Telephone: 875-4304 or 875-4575

Allergist - Telephone: 734-4848

NOTE: This is a controlled document. A printed copy may not reflect the current, electronic version on the VCH Intranet. Any documents appearing in paper form should always be checked against the electronic version prior to use. The electronic version is always the current version. This CPD has been prepared as a guide to assist and support practice for staff working at Vancouver Acute. It is not a substitute for proper training, experience and the exercise of professional judgment. Please do not distribute this document outside of VCHA without the approval of the VCH Office of Professional Practice.

Allergist - Telephone: 879-8491

VGH :

Clinical Care: Educator - Pager: 87-03463

Pharmacy: Pager: 87-03031

UBCH:

Clinical Care Educator - Pager: 877-5953

Pharmacy:, Pharmacist - Pager: 871-5194

GFS

Nurse Clinician - Telephone: 734-1313 L. 2319

GPC

Resident Services Co-ordinator - Telephone: 322-8312

ASSOCIATED GUIDELINES / FORMS / EDUCATIONAL MATERIAL:**WEB SITE INFORMATION ON LATEX ALLERGIES**

- www.allergy.mcg.edu/advice/latex.html
- www.worksafebc.com/pubs/brochures/howto/latex.asp

References

- AAAA1 & ACAA I (1997). Joint Statements Concerning the Use at Powdered & Non-Powdered Natural Rubber Latex Gloves.
- ANA. (1997) Position Statement on latex allergy.
- Burt, Sharon (1998). What you need to know about Latex Allergy. Nursing 98. 28:10, 33-40.
- Cohen, David E. et al (1998). American Academy of Dermatology's position paper on latex allergy. Journal of American Academy of Dermatology, 39:1, 98-106.
- Jackson, D. (1995). Latex Allergy & Anaphylaxis, What to Do? Journal of Intravenous Nursing. Vol. 18, No. 1: 33-52.
- Nguyen, D., Burns, M., Shapiro, G., Mayo, M., Murray, M., Mitchell, M. (1991) Intraoperative Cardiovascular Collapse Secondary to Latex Allergy. The Journal of Urology, 146: 571-574.
- Sussman, G., Beezhold, D. (1995). Allergy to Latex Rubber. Annals of Internal Medicine, 122: 43-46.
- Sussman, G. & Gold, M. (1996). Guidelines for the Management of Latex Allergies and Safe Latex Use in Health Care Facilities. CHA Press, Ottawa.
- Worker's Compensation Board of B.C. (1997). Dealing with Latex Allergies at Work.

UNIT(s) OF ORIGIN: Professional Affairs, 2001

L-040

APPENDIX 1

Contents of Latex Free Box

Airway

Non-latex Ambubag mask
UBC only: Non Latex Ambubag

Blood Pressure Cuff

Latex Free Blood Pressure cuffs and connectors (sizes small, medium and large)

Catheters

Suction Catheters: Yankauer, vented & non-vented (2 each)
Silicone Foley Catheters: Sizes #14 and #16 (2 each)

Dressings

Opsite Transparent dressing (6 @15 x 18; 6 @ 10 x14)

Gloves

Nitrile bulk gloves: sizes small, medium, large (1 box of each)
Nitrile sterile gloves: sizes 6 ½, 7 ½, 8, 8 ½, (6 pairs of each)

Signs

Musculosal Latex Precautions sign (2)
Full Latex Precautions sign (2)

Tape

Silk tape (1 @ 13mm and 1 @ 25mm)

Tourniquet

Velcro tourniquet
Reorder requisition

Miscellaneous

Softroll (4)
Cast padding