

Acute Anaphylaxis Clinical Care Standard: 6c- Proportion of patients treated for anaphylaxis who require adrenaline injectors who are supplied or prescribed an adrenaline injector prior to separation from hospital.

Identifying and definitional attributes

Metadata item type:	Indicator
Indicator type:	Indicator
Short name:	6c-Proportion of patients treated for anaphylaxis who require adrenaline injectors who are supplied or prescribed an adrenaline injector prior to separation from hospital.
METEOR identifier:	745157
Registration status:	<ul style="list-style-type: none">• Australian Commission on Safety and Quality in Health Care, Standard 24/11/2021
Description:	Proportion of patients treated for anaphylaxis who require adrenaline injectors who are supplied or prescribed an adrenaline injector prior to separation from hospital.
Indicator set:	Clinical care standard indicators: Acute Anaphylaxis Australian Commission on Safety and Quality in Health Care , Standard 24/11/2021

Collection and usage attributes

Population group age from:	All ages
Computation description:	For the numerator and denominator separations involving patients with anaphylaxis in hospital settings can be identified using the ICD codes specified in Table A.

Table A: ICD-10-AM 11th edition codes for anaphylaxis

Code	Description
T78.0	Anaphylaxis and anaphylactic shock due to adverse food reaction
T78.2	Anaphylaxis and anaphylactic shock, unspecified
T80.5	Anaphylaxis and anaphylactic shock due to serum
T88.6	Anaphylaxis and anaphylactic shock due to adverse effect of correct drug or medicament properly administered

Computation:	Presented as a percentage. (Numerator ÷ Denominator) x 100
Numerator:	The number of patients treated for anaphylaxis who require adrenaline injectors who are supplied or prescribed an adrenaline injector prior to separation from hospital.
Denominator:	The number of patients treated for anaphylaxis who require an adrenaline injector.

Comments: A patient should be given a personal adrenaline injector or a prescription for this medicine where there is a risk of re-exposure to the allergen.

Use of adrenaline injector is typically recommended for patients with:

- History of anaphylaxis
- Food allergy (excluding oral allergy syndrome) and co-existing unstable or moderate to severe, persistent asthma
- Underlying mast cell disorders.

For a comprehensive list of considerations to identify patients for whom use of adrenalin injectors are appropriate, please refer to the [ASCIA Guidelines - Adrenaline \(Epinephrine\) Autoinjector Prescription](#).

Representational attributes

Representation class: Percentage

Data type: Real

Unit of measure: Person

Format: N[NN]

Accountability attributes

Other issues caveats: Applicable settings: public and private hospitals.

Source and reference attributes

Reference documents: Australian Commission on Safety and Quality in Health Care 2021. Acute Anaphylaxis clinical care standard. Australian Commission on Safety and Quality in Health Care, Sydney.