



QUINTE HEALTHCARE CORPORATION

Appendix A: Guidelines for Managing the Latex Sensitive Patient in the OR

Preamble

Implementation refers to enacting the activities comprising the interventions identified in the individualized plan of care. This includes taking latex-allergy precautions as appropriate and maintaining the latex-safe care plan throughout the patient's surgical stay. If latex or latex-containing products remain in the patient's immediate care environment, those products should be removed.

Nursing interventions are composed of many and varied activities. To care for the latex-allergic individual, some or all the following activities will be appropriate, particularly if the patient is not in a department-wide latex-safe environment. These recommendations are based on the AORN, 2011 Latex Guideline and 2017 ORNAC Standards.

Pre-operative activities

The following activities should take place before the surgical procedure:

- ❖ Notify OR of potential or known latex-allergic patient at time of booking, or when made aware
- ❖ Identify the patient's risk factors for latex allergy and communicate to health care team.
- ❖ Notify all other care providers of patient's allergy status.
- ❖ Plan for a latex-safe environment of care.
- ❖ Involve patient, family members, and significant others in planning patient care.
- ❖ Educate patient about latex-safe plan and ensure involvement of all providers.
- ❖ Provide latex-sensitive patients with a red allergy band specifying 'latex allergy' and ensure that the chart is clearly labelled.
- ❖ Secure latex-free products for all latex-containing items on surgeon's preference card and those used by anaesthesia.
- ❖ Remove all latex items from OR unless no non-latex alternative exists.
 - Remove latex gloves and replace with non-latex gloves
 - Double-check all supplies and equipment for latex and remove any latex containing items. Examples of products containing latex include but are not limited to: urinary catheters, face masks, drains (ORNAC, 2017)
- ❖ Notify surgeon and anaesthesia if no alternative product is available.
- ❖ If latex-containing product is to be used, collaborate with anaesthesia to develop a plan for emergency care if needed.

Intraoperative activities

The following activities should be performed during the surgical procedure:

- ❖ Place latex-safe signs on OR Suite doors
- ❖ Remind all health care team members of the necessity for a latex-safe environment
- ❖ Restrict traffic flow in the room before and during the procedure.
- ❖ Use latex-free equipment and supplies. Although the majority of products at QHC are latex-free these may include: urinary catheters, face masks, drains
- ❖ Verify that additional items requested after the case is in progress are latex-free before delivering them to the sterile field.
- ❖ Be prepared for the possibility that the procedure may require more than the scheduled equipment (e.g., laparoscopy to open).
- ❖ Monitor for anaphylactic reactions to latex throughout the procedure as reactions may occur immediately after induction (e.g., IV exposure) or up to 40 minutes later. Signs and symptoms may include:
 - Rash, redness, urticaria, or localized swelling
 - Signs and symptoms of anaphylaxis: bronchospasm, laryngeal edema, hypotension, tachycardia, angioedema, respiratory or cardiac arrest
- ❖ Inform post anaesthesia care unit (PACU) staff members in advance of the patient's arrival time.
- ❖ Document latex-safe environment and care provided.

Postoperative activities

The following activities should be performed after the surgical procedure.

- ❖ Ensure latex-safe plan is included in hand off communications.
- ❖ Provide education for patient, family members, and significant others