 **Hives Standing Order**

|  |  |  |  |
| --- | --- | --- | --- |
| Issue date: |  | Review date: |  |

This standing order is not valid after the review date. The review date is one year after the date the order was signed by the issuer.

|  |  |
| --- | --- |
| **Standing Order Name** | Hives (Urticaria) |
| **Rationale** | To promptly and appropriately treat patients presenting with signs of acute urticaria. |
| **Scope (condition and patient group)** | Adults and children presenting with symptoms assessed as being due to urticaria. |
| **Red Flags** | Bacterial or fungal infections of the skin  Autoimmune thyroid disease – may be indicated by an enlarged thyroid  Connective tissue diseases – may be indicated by joint swelling or tenderness or oral ulceration, e.g. rheumatoid arthritis, systemic lupus erythematosus  Liver disease/dysfunction – may be indicated by tenderness on palpation of the liver or jaundice, e.g. cholestasis can cause pruritus and acute urticaria can be an early sign of hepatitis A, B and rarely C |
| **Assessment** | 1. Clinical History   * When did the urticaria start? * How often do they happen? * Are there any obvious triggers?   + Food allergies are an unlikely cause of chronic urticaria.   + Some factors may aggravate the urticaria e.g., heat, cold, tight clothing, NSAIDs, alcohol, stress. * Any associated features (e.g., angioedema)? * What treatments have been used? * Previous history of urticaria and other relevant medical problems (e.g., hypothyroidism)?   2. Determine:   * Frequency, size, distribution and duration of the lesions – to determine type of urticarial   3. Examination will usually show the presence of well-circumscribed pruritic wheals that resolve within 24 to 48 hours.  4. Rule out dermatographism, pruritus, other causes of itchy rash (e.g., scabies).  5.Determine whether acute (< 6 weeks' duration) or chronic (> than 6 weeks' duration). |
| **Indication** | **Symptomatic relief of acute urticaria** |
| **Medicine** | **Loratadine** tablets or liquid |
| **Dosage instructions** | Adults and children > 30kg: 10mg ONCE daily PRN  Children 2-12 years < 30kg: 5mg ONCE daily PRN |
| **Route of administration** | Oral |
| **Quantity to be given** | 10 days supply |
| **Contraindications** | Patients who have shown hypersensitivity to loratadine  Children under the age of 2 years |
| **Precautions** | * Reduce dose frequency to alternate days in severe hepatic impairment * Pregnancy- category B1 |
| **Additional information** | The use of cool damp cloths, reduction of night-time heating and tepid showers may be useful.  When the clinical history does not reveal an obvious cause for the urticaria, an avoidance strategy for potential triggers may be considered.  Dietary investigations rarely identify a specific trigger for chronic urticaria, and are not necessary in cases where symptoms can be easily controlled with oral antihistamines. However, if the patient wishes to, a food diary may be used to record and eliminate suspected triggers. |
| **Follow-up** | If symptoms persist, worsen or are severe then advise patient to return. |
| **Countersigning and auditing** | Countersigning is not required. Audited monthly.  **OR**  Countersigning is required within ***XX*** days |
| **Competency/training requirements** | All nurses working under this standing order must be signed off as competent to do so by the issuer and have had specific training in this standing order. |
| **Supporting documentation** | Healthpathways at [www.healthpathways.org.nz](http://www.healthpathways.org.nz)  Best Practice Journal at [www.bpac.org.nz](http://www.bpac.org.nz)  New Zealand Formulary at [www.nzf.org.nz](http://www.nzf.org.nz)  Individual medicine data sheets at [www.medsafe.govt.nz](http://www.medsafe.govt.nz)  Standing Order Guidelines, Ministry of Health, 2012  Medicines (Standing Order) Regulations 2012 (Standing Order Regulations) |
| **Definition of terms used in standing order** | Dermatographism - a condition in which lightly touching or scratching the skin causes raised, reddish marks  Category B1 -Drugs which have been taken by only a limited number of pregnant women and women of childbearing age, without an increase in the frequency of malformation or other direct or indirect harmful effects on the human foetus having been observed. Studies in animals have not shown evidence of an increased occurrence of foetal damage. |

|  |  |
| --- | --- |
| **Medical Centre or Clinic:** |  |

|  |
| --- |
| **Signed by issuers** |

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| **Nurses operating under this standing order** |

Only Registered nurses working within the above medical centre or clinic are authorised to administer medication under this standing order.

We the undersigned agree that we have read, understood and will comply with this standing order and all associated documents.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_