


Dermatological			Respiratory or Systemic			Unknown				
Skin manifestation		Recommendation & Resultant allergy type	Clinical manifestation	Recommendation & Resultant allergy type		Clinical manifestation		Recommendation & Resultant allergy type		
<b>Childhood exanthem</b> (unspecified) <i>Mild rash with no severe features</i>		<input type="checkbox"/>	Unlikely to be significant (non-severe)	<b>Laryngeal involvement</b> ("throat tightness" or "hoarse voice")	<input type="checkbox"/>	Immediate hypersensitivity (severe)	<b>Unknown reaction</b> ≤ 10 years ago		<input type="checkbox"/>	Unknown (non-severe)
<b>Immediate diffuse rash</b> ("itchy immediate rash") <2 hours post dose		<input type="checkbox"/>	Immediate hypersensitivity (non-severe)				<b>Unknown reaction</b> > 10 years ago or family history of penicillin allergy only		<input type="checkbox"/>	Unlikely to be significant (non-severe)
<b>Diffuse rash or localized rash/swelling</b> with no other symptoms (non-immediate or unknown timing)	> 10 years ago or unknown	<input type="checkbox"/>	Delayed hypersensitivity (non-severe)	<b>Respiratory compromise</b> ("shortness of breath")	<input type="checkbox"/>	Immediate hypersensitivity (severe)	<b>Renal</b>			
	≤ 10 years ago	<input type="checkbox"/>	Delayed hypersensitivity (non-severe)				<b>Fever</b> ("high temperature") <i>Not explained by infection</i>	<input type="checkbox"/>	Delayed hypersensitivity (severe)	<b>Severe renal injury, failure or AIN</b> (>50% reduction in eGFR from baseline or absolute serum creatinine increase of ≥26.5µmol/L, or transplantation, or dialysis)
<b>Angioedema</b> ("lip, facial or tongue swelling")		<input type="checkbox"/>	Immediate hypersensitivity (severe)	<b>Anaphylaxis or unexplained collapse</b>	<input type="checkbox"/>	Immediate hypersensitivity (severe)				<b>Mild renal impairment</b> (Does not meet criteria in box above)
<b>Generalized swelling</b> (outside of angioedema)		<input type="checkbox"/>	Immediate hypersensitivity (severe)				<b>Haematological</b>			<b>Liver</b>
<b>Urticaria</b> ("wheals and hives")	<input type="checkbox"/>	<input type="checkbox"/>	Immediate hypersensitivity (non-severe)	<b>Low platelets</b> < 150 x10 <sup>9</sup> /L or unknown	<input type="checkbox"/>	Potential immune mediated (severe)	<b>Severe liver injury, failure or DILI</b> (≥5x upper limit of normal (ULN) for ALT or AST, or ≥3x ULN for ALT with ≥2x ULN for bilirubin, or ≥2x ULN for ALP, or transplant)		<input type="checkbox"/>	Potential immune mediated (severe)
							<b>Low neutrophils</b> < 1x10 <sup>9</sup> /L or unknown	<input type="checkbox"/>	Potential immune mediated (severe)	<b>Mild hepatic enzyme derangement</b> (Does not meet criteria in box above)
<b>Mucosal ulceration</b> ("mouth, eye or genital ulcers")		<input type="checkbox"/>	Delayed hypersensitivity (severe)	<b>Low haemoglobin</b> < 100 g/L or unknown	<input type="checkbox"/>	Potential immune mediated (severe)	<b>Gastrointestinal, Neurological or Infusion-related</b>			
<b>Pustular, blistering or desquamating rash</b> ("skin shedding")		<input type="checkbox"/>	Delayed hypersensitivity (severe)				<b>Eosinophilia</b> (>0.7 x 10 <sup>9</sup> /L or unknown)	<input type="checkbox"/>	Delayed hypersensitivity (severe)	<b>Gastrointestinal symptoms</b> ("nausea, vomiting, diarrhoea")
		Appropriate for direct oral rechallenge (or direct de-labelling)			<input type="checkbox"/>	Low risk				<b>Severe neurological manifestation</b> ("seizures or psychosis")
		Appropriate for direct oral rechallenge			<input type="checkbox"/>	Low risk	<b>Anaphylactoid/infusion reaction</b> (e.g. red man syndrome)		<input type="checkbox"/>	Unknown or unclear mechanism
		May be appropriate for referral for specialized skin testing			<input type="checkbox"/>	Moderate risk				
		May be appropriate for referral for specialized skin testing			<input type="checkbox"/>	High risk				