Northwestern Medicine®

Beta-Lactam Allergy Questions

What to ask the patient with a beta-lactam allergy

Only 10 – 20% of patients reporting a penicillin allergy are truly allergic. Many of these patients have experienced an adverse reaction or side effect, or may have taken a beta-lactam (cephalosporin) antibiotic without adverse effects. A detailed history of the patient's reaction to penicillin may allow healthcare providers to exclude a true penicillin allergy, allowing the patient to be treated with a beta-lactam antibiotic.

1. How long ago did you have a reaction to penicillin/cephalosporin?

2. Do **YOU** recall the reaction… Or did someone tell you about it?

3. How long after you took penicillin/cephalosporin did the reaction start?

4. What happened when you took penicillin/cephalosporin? (Check all that apply)

- IMMEDIATE reactions
  ☐ Angioedema (**ACUTE** swelling of face, tongue, neck, lips, throat, hands, feet)
  ☐ Shortness of breath, wheezing

DO NOT ADMINISTER penicillin or other beta-lactam antibiotics (e.g. cephalosporins or carbapenems) to patients who describe an immediate reaction (angioedema, shortness of breath, facial swelling) to penicillin or other beta-lactam antibiotics

- OTHER reactions
  ☐ Other skin reaction: _____
  ☐ Pruritis (itching)
  ☐ GI symptoms (e.g. nausea/vomiting/diarrhea): _____
  ☐ Other reaction: _____

5. Since you had a reaction, have you taken other beta-lactam antibiotics (ampicillin, amoxicillin, Ancef, cefazolin, Ceftin, cefuroxime, Keflex, cephalexin, Rocephin, Augmentin) without reaction? ☐ Yes ☐ No

Cephalosporins (e.g. cefazolin, ceftriaxone or cefepime) can be safely administered to penicillin-allergic patients who DO NOT have a history of an immediate reaction to penicillin OR who have received a cephalosporin or carbapenem WITHOUT REACTION.

Once the patient's antibiotic reaction has been assessed, please document this assessment in patient's electronic medical record. This will communicate to all healthcare providers the nature of the antibiotic reaction and allow for the most cost- and clinically-effective antimicrobial treatment.