Introduction

The understanding of food allergy underwent major changes since publication of the LEAP study. This has influenced the approach to food allergy management. Primary care physicians are first line healthcare providers in this regard.

This project aims to:

• Understand the approach to food allergy visits in primary care settings in terms of diagnosis, management, and providing anticipatory guidance

• Evaluate consistency of epinephrine auto-injector prescription updates

Discussion

Pediatric primary care providers are first line in diagnosing and managing food allergy. A majority of providers indicated desire for guidance on diagnosis and management. Based on the results from this study, areas of improvement include:

• Increasing provider confidence with providing anticipatory guidance on adverse food reactions

• Standardizing the diagnosis and management of food allergy

• Increasing support for timely update of epinephrine auto-injectors

This study also showed that practice patterns identified by chart review does correlate with providers' self reported practices.

In November 2019, the FARE Food Allergy & Anaphylaxis Emergency Care Plan was distributed in pediatric resident clinic sites to standardize the management of food allergy in pediatric primary care clinics. Currently, the rate of utilization of this intervention is being studied.

Future directions of this project would include the distribution of a standardized anaphylaxis action plan throughout Cleveland Clinic Children’s healthcare system and throughout local Cleveland school districts.

Results

53 out of 142 (37%) primary practice providers completed the provider survey. Participants included attending physicians, advanced practice providers and resident physicians.

Key findings include:

• 54.7% of providers reported that they would order serum specific IgE levels, while in practice, in vitro testing was ordered during 8.1% of encounters

• 11.3% of providers reported being “uncomfortable” or “very uncomfortable” with adjusting epinephrine according to patient weight while in retrospective chart review, only 5.7% (32 of 558) of epinephrine auto-injectors were under dosed compared to patient weight

• 66% of providers indicated interest in more guidance on diagnosis

• 71.7% desired more information regarding food allergy management

• 13.2% of providers reported being “neutral” to “very uncomfortable” with providing anticipatory guidance on adverse food reactions

References