

Appendix 1. Table of allergic rhinitis referral and management information

	Category	Criteria
Patient information	Demographic data	Age, sex, Aboriginal/Torres Strait Islander status
Management pre-clinic (referral information)	Treatment	Defined as either intranasal corticosteroid or non-sedating antihistamines
	Duration of treatment	Defined as either treatment started at time of referral, treatment started <2 months before referral or treatment started ≥2 months before referral
Management in clinic (clinic documentation)	Allergen immunotherapy group	Commenced allergen immunotherapy within first or second appointment
	Discharge group	Discharged from clinic within first or second appointment after optimising primary management
	Ongoing review group	Ongoing clinic appointment (to determine potential need for starting allergen immunotherapy)

This appendix is unedited and published as supplied by the author.

Appendix 2. Letter sent to both general practitioners and patients as part of streamlined referral process for declined referrals.

PATIENT

D.O.B.

Dear Doctor,

We have received your referral for _____ to attend the Paediatric Allergy and Immunology clinic at Cairns Hospital. We are writing to advise we are streamlining the management for allergic rhinitis due to an increasingly long waitlist (currently category 2 is >12 months) and because a large number of patients seen in clinic are discharged after optimising primary management.

Treatment

We have attached further information for the general management of this condition in accordance with guidelines from the Australasian Society of Clinical Immunology and Allergy (ASCIA) Allergic rhinitis (hay fever)? - Australasian Society of Clinical Immunology and Allergy (ASCIA) and FNQ Health Pathways <https://fnq.communityhealthpathways.org/>.

Recommended treatment:

- As needed or regular non-sedating antihistamines. If symptoms inadequately controlled, then addition of:
- Regular intranasal spray of corticosteroid or combination corticosteroid/antihistamine applied to target the inferior turbinates.

Re-referral

In line with above, this referral has not been accepted. We request you re-refer your patient if the problem persists after treatment with the above regimen for 8 weeks and if the family are interested in pursuing allergen immunotherapy Allergen Immunotherapy FAQs - Australasian Society of Clinical Immunology and Allergy (ASCIA). Please note there are out-of-pocket costs for immunotherapy that are not subsidised by Pharmaceutical Benefits Scheme or the Hospital and if effective by 12 months, treatment is recommended to continue for 3 to 5 years. Please include the following salient points in your referral for triaging: treatment, treatment frequency & duration and impact of symptoms on patient's day to day life.

Yours sincerely,

Appendix 2. Continued**For Patients**

We encourage patients to see their GP to ensure a 'Allergic Rhinitis Treatment Plan' is completed which can be found on the ASCIA website at: https://www.allergy.org.au/images/pc/ASCIA_Treatment_Plan_Allergic_Rhinitis_2023.pdf.

This ensures your child's management is optimised in a timely manner due to our long wait list.

We would like to provide the following information for families:

- **Allergen testing:** skin prick or allergen testing is not routinely performed to identify allergen triggers rather as part of work-up for immunotherapy.
- **Antihistamines:** non-sedating over the counter antihistamines are better used as a preventer rather than treatment alone when symptoms are frequent or troublesome. Several studies in children have shown the medication to be safe for long-term use. Routine switching between antihistamines is not required but can be done if your child tends to respond better to one type of antihistamine than the another. Antihistamines are often cheaper when bought in bulk versus single boxes.
- **Nasal spray:** medication should be targeted towards the inferior turbinates (inside the nose and directed towards the outer part of the eye). Correct technique can be reviewed here *How to use nasal spray | Asthma + Lung UK* (asthmaandlung.org.uk)

If your child is requiring re-referral to the service, please provide your GP with the information below:

Key Questions – My Child's Allergic Rhinitis

1. What treatment is your child on for management of allergic rhinitis?

.....

2. How often is this medication taken by your child and for how long (days, weeks or months)?

.....

3. In the past 6 months, how often is this problem affecting your child?

<4 days per week OR <4 weeks []

>4 days per week OR > 4 weeks []

4. Does this condition affect your child's sleep, daily activities or cause difficulties at school or work?

Yes [] please specify

No []