Application for eculizumab to treat aHUS
Clinical and Diagnostic Check List

Patient Name: **DOB:**
NHS Number:

Initiating trigger

- Non-shiga toxin diarrhoea ☐
- Respiratory tract infections ☐
- Other infection ☐
- Malignancy ☐
- Bone marrow transplantation ☐
- New medication (see list) ☐
  detail _____

Extra-renal manifestations

- Neurological involvement ☐
- Pancreatic Involvement ☐
- Ocular involvement ☐
- Digital gangrene ☐
- Other ☐
  _____

Family member also affected ☐

Pregnancy associated ☐

The patient is on

- Haemodialysis ☐
- Plasma Exchange ☐

Date of Presentation :

Full Clinical History (must be completed)

Drugs associated with aHUS
Cisplatin ; Gemcitabine ; Mitomycin ; Clopidogrel ; Quinine; Interferon α,β; Anti-vascular endothelial growth factor; Campath; Cyclosporin tacrolimus ; Ciprofloxacin; Oral contraceptives Illicit drugs [e.g. cocaine, heroin, ecstasy]

Results of investigations confirming a thrombotic microangiopathy and AKI

Test	Date	Result
Platelet count		
Blood film		
LDH		
Haptoglobins		
Prothrombin time		
Creatinine		
Renal biopsy		

Results of investigations confirming a diagnosis of aHUS

Differential Diagnosis	Test	Date Sent	Result
TTP	ADAMTS13 activity		
STEC HUS	Stool culture		
STEC HUS	*E.coli* endotoxin antibodies (IgM)		
APL Antibody syndrome	APL antibody		
SLE	DsDNA		
HIV	HIV test		
Scleroderma	ANA		
Scleroderma	Anticentromere antibodies		
Scleroderma	Anti-acl-70		
Cobalamin C disease	Plasma homocysteine levels		
Cobalamin C disease	Plasma and urine methylmalonic acid levels		
aHUS	C3		
aHUS	C4		
aHUS	CH50		
aHUS	Complement genetics		
aHUS	Factor H autoantibodies		

The results of all these need not be back before you send this form but the result of the ADAMTS13 activity must be available.