ALLERGY TESTING INFORMATION

1. On the day of testing please wear a short-sleeved shirt that can be pushed up comfortably to your shoulder. Allow 1-2 hours for your test session. You will need to stay on the premises during this time. Please do not bring children to your appointment.

2. Remember to STOP TAKING ANTIHISTAMINES and DECONGESTANTS at least 5 days before your appointment (See attachment for stop times concerning individual meds.). Please discontinue Astelin nasal spray 24 hours prior to testing. Please inform the staff of any medications you are taking that would prevent you from being tested (See attached forms).

3. Allergy testing is done on your lower forearm with tiny applicators that abrade the surface of the skin. Each device contains fluid (extracts) from native Texas allergens. If you are allergic to any of the antigens, you will get a raised, itchy bump that resembles a large mosquito bite.

4. Insurance pre-certification will be done prior to your appointment. Patients will be informed of charges not covered by insurance and will be responsible for all charges not covered at the time of testing.

I, ______________________________________, have read and understand the above Information and attachments.

Signature/Date ____________________________ / __________

Witness _________________________________
ALLERGY HISTORY

Instructions
Carefully complete in full. Accuracy and thoroughness are essential. Print all answers. Relate all answers to your own experiences, not to previous advice on skin tests. This form must be completed prior to seeing the practitioner. All information will be considered confidential.

Name_____________________________________DOB ____/____/_____Age_____

State problems you wish to discuss:

□ Runny Nose  □ Sneezing  □ Nasal Congestion  □ Eye Problems
□ Cough  □ Wheezing  □ Asthma  □ Hives
□ Rashes  □ Food Sensitivities  □ Sinus Infections  □ Ear Infections
□ Pneumonia  □ Bronchitis  □ Reflux

When did it begin? ______
Worse at night/day? _____

Check months most severe:

□ All months
□ January  □ April  □ July  □ October
□ February  □ May  □ August  □ November
□ March  □ June  □ September  □ December

Check items that affect your symptoms
Are your symptoms made worse by:

- Wind
- Smoke
- Barns/Hay
- High pollution day
- Damp areas
- Soap
- Mowing lawns
- Insecticides
- Dust
- Paint fumes
- Perfumes
- Cosmetics
- Newspapers
- Weather change
- Wet weather
- Dry weather
- Cold day
- Air-conditioning
- Travel/Vacations
- Clorox
- Perfume
- Ammonia
- Cleanser
- Room deodorants
- Detergent
- Tobacco smoke
- Wax
- Exhaust

Previous Allergy Treatment

1. Have you ever had skin testing done?
   - Yes
   - No
   If yes, by whom? _________________________
   Last Date Tested: _________________________

2. Have you ever been treated with Allergy Shots?
   - Yes
   - No
   If yes, what were you treated for?
   - Grass pollens
   - Molds
   - Weed pollens
   - Dust
   - Tree pollens
   - Animals

4. Did the Allergy Shots help you?
   - Yes
   - No
   - Don’t know

5. What years were the shots taken?
   __________ to ___________

Medical History

- Asthma
  If so, ever hospitalized for asthma: _________________________
- High blood pressure
  What medication do you take to control it? _________________________
- Recurrent Ear infections
- Recurrent sinus infections
- Repeated tonsillitis
- Cancer: What type; _________________________
- Heart trouble: What kind? _________________________
- Diabetes: Type I or II

Are you pregnant now?  □ Yes  □ No  
Last Period Date: ________
Actively trying to conceive?  □ Yes  □ No
Other Medical conditions not mentioned: _________________________

Pets
Which of these do you have as pets or exposed to:
- Dog
- Cat
- Bird
- Horse
- Hamster
Skin Testing Information and Consent

1. Skin Testing
   An allergy skin test is used to identify the substances that are causing your allergy symptoms. We will apply several extracts of common allergens to the skin and observe for a reaction. The reactions are then graded and confirmatory intradermal testing may be performed. This involves injecting a small amount of extract under the skin of the upper arm. We then observe the reaction and record the results.

2. Risks of Skin Testing
   Bleeding and infection may occur due to the abrading of the skin. Any time the skin integrity is broken it puts one at risk for infection. However, this is a very rare occurrence. The antigens used for testing are sterile and approved by the FDA. Occasionally, skin testing can trigger a severe allergic reaction requiring treatment with medications available in our office and/or the ER. Patients with asthma are at increased risk for triggering an asthma attack during testing. You should not undergo testing if you feel that your allergy or asthma symptoms are currently under poor control.

3. Contra Indications to Skin Testing
   Woman who are pregnant or anyone who is currently taking Beta-blocker medications should not have skin testing done. If you have taken any antihistamines, on the list provided, within the specified time prior to your appointment testing will not be
performed. These medications interfere with the immune process needed for a reliable test. Please be sure to inform us of all medications you have taken before the skin test is applied. **(You must discontinue Atarax (Hydroxyzine), Xyzal and Zyrtec a minimum of 5 days prior to testing).** Patients on Beta-blockers will NOT be skin tested because death may occur. If you are not sure if you are taking an antihistamine or beta-blocker, please ask your pharmacist.

4. **Consent for Skin Testing**
I understand the risks and benefits of skin testing and all questions have been answered to my satisfaction. I consent to skin testing and understand that I am financially responsible for all charges not covered by my medical insurance. I understand that the fees incurred for allergy testing will be my responsibility to the extent that insurance deductible, co-payments, and allowables, may leave a balance. It is also my understanding that the insurance claims will be filed first, with the balance being billed to me following processing of the insurance claim(s).

NAME (Print) ________________________________

Date __________________

SIGNATURE__________________________________

***VERY IMPORTANT ***
LET US KNOW IF YOU ARE TAKING ANY OF THE FOLLOWING MEDICATIONS

**BETA BLOCKERS**
- Beta Pace (sotalol)
- Blocadren (timolol maleate)
- Brevibloc injection (esmolol)
- Cartrol (carteolol)
- Corgard (nadolol)
- Corzide (nadolol)
- Inderide (propanolol)
- Inderide LA (propanolol)
- Inderol (propanolol)
- Inderol injection (propanolol)
- Kerlone (betaxolol hydrochloride)
- Levatol (penbutolol sulfate)
- Lopressor HCT (metoprolol)

- Normodyne (labetalol)
- Normozide (labetalol)
- Sectral (acetabulol)
- Tenoretic (atenolol)
- Tenormin (atenolol)
- Timolide (timolol maleate)
- Toprol (metoprolol succinate)
- Trandate (labetalol)
- Trandate HCT (labetrol)
- Visken (pindolol)
- Zebeta (bisoprolol fumarate)
- Ziac (bisprolol)
TOPICAL BETA BLOCKERS
Betagan Liquifilm (levobunolol hydrochloride)
Betoptic (betaxolol hydrochloride)
Ocupress (carteolol hydrochloride)
Timoptic (timolol maleate)

TRICYCLIC ANTIDEPRESSANTS
Adepin (doxepin hydrochloride)
Anafranil (clomipramine hydrochloride)
Ascendin (amoxapine)
Elavil (amitriptyline pamoate)
(amitriptyline hydrochloride)
Etrafon (amitriptyline)
Ludiomil (maprotiline hydrochloride)
Norfranil (imipramine hydrochloride)
Norpramin (desipramine hydrochloride)
Pamelor (nortriptyline hydrochloride)
Sinequan (doxepin hydrochloride)
Surmontil (trimipramine maleate)
Tofranil (imipramine pamoate)
Triadapin (doxepin hydrochloride)
Triptil (protriptyline hydrochloride)
Vivactil (protriptyline hydrochloride)

MONOAMINE OXIDASE INHIBITORS
Marplan (isocarboxazid)
Nardil (pheneizine sulfate)
Parnate (tranclypromine sulfate)

PLEASE DO NOT STOP ANY PRESCRIPTION MEDICATION WITHOUT DISCUSSING IT WITH THE DOCTOR FIRST.

ANTIHISTAMINES

YOU MUST STOP TAKING ALL ANTIHISTAMINES 5 DAYS PRIOR TO THE ALLERGY TESTING.

PRESCRIPTION
Allegra (fexofenadine)
Allegra D (fexofenadine)
Atarax (hydroxyzine)
Benadryl prescription (diphenhydramine)
Claritin D (loratidine)
Clarinex (desloratadine)
Periactin (cyproheptadine)
Phenergan (promethazine)
Vistaril (hydroxyzine)
Zyrtec (cetirizine)
Xyzal (levocetirizine)
Patanase (olopatadine hydrochloride)
OVER-THE-COUNTER
Benadryl (liquid or capsule form)
Dimetapp (brompheniramine maleate)
Chlor Trimeton
Chlorpheniramine maleate
Claritin (loratidine)
Dexchlorpheniramine maleate
Diphenhydramine hydrochloride
Promethazine HCL
Tavist, Tavist D (clemastine fumarate)
Triaminic
Tripelemamine citrate or hydrochloride
Trimeprazine tartrate
Tripolidine hydrochloride
Tylenol PM
Tylenol Allergy & Sinus
Antacids (Tagamet, Zantac, Pepcid, Pepcid AC, Axid)
Allergy eye drops (livostin, Patanol, etc.)

ALL VITAMINS AND HERBAL MEDICINES NEED TO BE DISCUSSED & STOPPED PRIOR TO TESTING. ESPECIALLY WATCH FOR VITAMIN C, ST. JOHN’S WORT AND GOLDENSEAL.

STOP ALL HERBAL ALLERGY SUPPLEMENTS 5 DAYS PRIOR TO TESTING.

HOW CAN YOUR ALLERGIES BE TREATED?
The best treatment for allergies is to identify the offending substances then carefully avoid exposure to them. This can be very effective for allergies to things like pets, dust mites and foods but is not possible for some allergies such as pollens, and mold spores.

Medications such as antihistamines, oral decongestants, nasal sprays, and bronchodilators may be effective in controlling your allergic symptoms. Medications may be used along with immunotherapy.
Immunotherapy, commonly referred to as “allergy shots” is a program designed to desensitize you to those substances to which you are allergic. A repeated injection of a sterile mixture (of those substances identified as causes of your allergies) allows your immune system to build up protection against them.

After several months of weekly injections or daily sublingual drops of increasingly stronger doses you will reach a maintenance dose and continue to receive that dose at regular intervals. The size of doses and length of intervals between doses depends greatly on your response to the therapy. Some people will receive complete symptom relief by taking immunotherapy.

An ongoing program of avoidance, medication, immunotherapy, or a combination of these methods, under the direct supervision of your doctor, is the best approach to controlling your allergies and allowing you to live more comfortably in your existing surroundings.