

ALLERVISION | Allergy History Questionnaire

* Patient Name: _____ * DOB: _____ Date: _____ *

Do you experience any of the following more than twice per year? (Check all that apply)

- Cough Cold Congestion Wheezing Runny Nose Sinus Pain Skin Irritation
 Headaches Sore Throat Ear Pain Itchy Eyes Snoring Ear Popping Repeated Sneezing
 Unexplained Fatigue Difficulty Breathing

Have you ever been diagnosed with asthma or bronchitis? Yes No

Do you experience symptoms of allergies? Yes No

Regarding possible food allergies, do you experience any of the following? (Check all that apply)

- Constipation Vomiting Stomach pain Diarrhea Indigestion Upset Stomach Nausea
 Cough Wheezing Tingling feeling of the mouth or tongue Bloating after eating

Have you had an allergy skin or blood test within the past 3 years? Yes No When? _____

Current symptoms you are experiencing: _____

When are your symptoms the worst? Spring Summer Fall Winter Year round

Do you have any family history of allergies? Yes No Who? Mother Father Sibling Other

Do you own any pets? Yes No Cat Dog Bird Other: _____

Do you smoke? Yes No If yes, how much? _____

What is your current occupation? _____

What do you think are your allergic triggers? _____

Current medications you are taking: _____

Are your current medications relieving your allergy symptoms? Yes No

Explain: _____

Have you ever had anaphylaxis? Yes No Not sure

Have you ever had a reaction to peanuts or bee stings? Yes No Which one: _____

If you have asthma, is it under control? Yes No How often do you use your inhaler? _____

Are you currently taking Beta Blockers? Yes No

Are you pregnant? Yes No N/A

Are you significantly immunocompromised, have malignancy or severe chronic illness? Yes No

Have you taken any antihistamine within the past 72 hours (3 Days)? Yes No Type: _____

To the best of my knowledge the information provided above is correct. _____
Patient/Guardian Signature

CLINIC USE ONLY

Is the patient recommended to have an allergy test? Yes No (Skin__ or Blood__) Food Panel__

Patient to test today? Yes No Scheduled for (Date) _____

Refer patient to a specialist. Yes No

Reviewed by: _____ Date: _____

ALLERVISION | Patient Medications Guide

Your AllerVision Skin Test is the gold standard of allergy testing.

There are some medications that may interfere with the results of an allergy skin test.

To ensure an accurate skin test please reference the guidelines below for some of the more common medications that interfere with allergy testing and how to address them.

If you are not sure what a particular medication you are taking is, ask your healthcare professional.

~DO NOT STOP TAKING ANY MEDICATIONS UNTIL YOU HAVE DISCUSSED IT WITH YOUR DOCTOR~

ANTIHISTAMINES

STOP TAKING THEM 72-HOURS PRIOR TO THE TEST

Actifed	Claratin (Loratadine)	Elestat eye drops	Tylenol Allergy Sinus
Allegra (Fexofenadine)	Clarinx	Optivar eye drops	Tylenol Cold and Flu
Astelin nasal spray	Dimetapp Cold & Allergy	Patanol eye drops	Tylenol Flu pm
Atarax (Hydroxyzine)	Diphenhydramine	Tavist	Zyrtec (Cetirizine)
Benadryl	Dramamine/Meclizine		

SLEEP AIDS

STOP TAKING THEM 24-HOURS PRIOR TO TEST

Many sleep aids such as Tylenol PM & Unisom Sleep contain antihistamines.

If it contains diphenhydramine (Benadryl) or Doxylamine succinate it contains antihistamine.

ANTACID MEDICATIONS

STOP TAKING THESE THE EVENING PRIOR TO YOUR SKIN TEST

Some prescription antacid medications can also have an antihistamine effect.

TUMS or ROLAIDS are fine as they simply counteract the acid itself.

Pepcid (Famotidine) Zantac (Ranitidine) Tagament (Cimetidine)

LEUKOTRIENE BLOCKING MEDICATIONS

DO NOT TAKE ON THE MORNING OF VISIT 2-3 HOURS PRIOR TO TEST

Singulair (Montelukast) Zyfo (Zileuton) Accolate (Zafirlukast)

ASTHMA INHALERS

THESE DO NOT INTERFERE WITH ALLERGY TESTING, TAKE AS PRESCRIBED

Advair	Asmanex	Dulara	Pulmicort
Aerobid	Atrovent	Duoneb	Qvar
Albuterol (Proair, Proventil, Ventolin)	Azmacort	Flovent (Fluticasone)	Symbicort
Alvesco	Combivent	Maxair	Xoponex (levalbuterol)

CORTICOSTEROID NASAL SPRAYS

THESE DO NOT INTERFERE WITH ALLERGY TESTING, TAKE AS PRESCRIBED

Flonase (Fluticasone)	Nasocort	Omnaris/Zetonna	Rhinocort
Nasalide	Nasonex	(Ciclesonide)	Veramyst
		QNASL	

BETA BLOCKERS

POSTPONE FOR 24-HOURS PRIOR TO TEST IF POSSIBLE

- These **DO NOT** interfere with allergy testing. This is an anaphylaxis risk safety measure. If you are on a beta blocker, the skin test can be performed 24 hours after your last dose.
- **You can take your medicine 30 minutes post skin test.**
- Injection immunotherapy is not recommended while on beta blockers however the sublingual drops are safe to take.

ORAL STEROIDS

- **Short term use** and **small doses** should have no effect on the skin test. However, it is recommended to be off treatment for a minimum of **2 weeks prior to the skin test** with short term use.
- **Long term use** and **high doses** of oral steroids such as 20 mg Prednisone or 16 mg of Medrol per day are likely to affect skin test results and a blood test will be needed.

ALLERVISION *How to Prepare for the Allergy Test*

What should I do, or not do, before my allergy test?

- Do not take antihistamines for three days before testing. If this is not possible, contact your provider to discuss options so you can undergo the allergy test as scheduled!
- Notify your provider before the test if you take beta blockers (blood pressure medication). If you are using beta blockers at the time of testing, your provider will perform a blood test instead of a skin test.
- Alert your provider if there's any chance you're pregnant. He or she can test for pregnancy before the skin test. If you *are* pregnant, you will receive a blood test instead of a skin test.
- Tell your provider if you are experiencing any signs of a severe allergic reaction on the day of testing (e.g. hives or difficulty breathing).
- Inform your provider if you have been diagnosed with cancer or an immune disorder.

What should I expect during testing?

Your provider will clean your skin on your back with an alcohol swab. That will feel cool and slightly wet. He or she will warn you before the testing begins. As the first set of antigens is applied to your skin, you'll feel minor pressure from the tines of the testing device. This will last for just a few seconds and then be repeated in five areas. You can expect slight discomfort, as well as some itchiness from positive results. Try to avoid scratching while the test develops. Notify your provider if you feel symptoms other than itchiness.

Will the tines penetrate my skin?

No, the testing unit (MAST device) is pressed onto your skin; no blood is drawn. If a spot of blood does appear, the provider simply blots the area and continues the procedure.

How long will it take for results to develop?

Results will be available in just 15 minutes. An allergy technician will check on you every five minutes or so during that time to make sure you are okay. After 15 minutes, he or she will read the results and remove the antigens with an alcohol swab.

What if I am extremely uncomfortable with reactions before 15 minutes are up?

If you have clearly positive reactions and are very uncomfortable, the technician will wipe the antigen off and read the results early.

How does my provider measure the reaction?

Reactions are evaluated by measuring raised areas of skin with a millimeter ruler. Allergic severity is graded as follows: 2-4mm=low; 5-7=moderate; 8-10=high; 11-13=very high.

What happens after the test?

The provider wipes the antigens off the skin with alcohol wipes. You may then receive hydrocortisone cream and/or oral Claritin if necessary to ease any lingering discomfort or itchiness. Then your provider will explain the results and discuss your options for treatment, if applicable.

How long will the reaction last after testing?

Itching begins to resolve as soon as the antigen is wiped away. Bumps usually last about an hour. In rare cases, the reaction may last longer but it is generally not uncomfortable. For the very rare cases of lasting reaction, Claritin and hydrocortisone cream help minimize discomfort.

How much does testing cost?

It is covered by most insurance plans. You will only be responsible for your regular co-pay and deductible.

Is there an age limit for testing and treatment?

No. Small children will be tested for fewer antigens than older children and adults, but the test is safe for children of any age.

Can I be tested if I have a skin condition or moles?

Yes. If possible, your provider will place the test on areas that are not acutely affected. If there are no unaffected areas, you will receive a blood test instead of a skin test.

Can I be tested if I have a tattoo?

Yes. The technician will place the test on areas that are not inked. He or she may use ink-free areas on your back, arms, or legs. If you are inked in all areas, you will receive a blood test instead of a skin test.

*** FOR Patient to take home ***