

Patient Name: _____ DOB: _____
NKU ID# _____

Allergy Immunotherapy (Allergy Injections) - Important Information

- Prior to initiating allergy injections, a history and physical exam will be conducted by the nurse practitioner.
- A nurse will follow your physician's instructions for administering allergy injections. If the instructions are unclear or if you are late for your injection, your physician will be contacted. It is your physician's responsibility to explain the risks of receiving allergy injections.
- You must report to the nurse any current illness, fever, or wheezing prior to receipt of an injection.
- **WARNING:** Individuals who are using a class of medication called a beta blocker or monoamine oxidase (MAO) inhibitors probably should not be on allergy injections. Examples of these drugs include **Inderal, Lopressor (metoprolol), Coreg, Nardil and Marplan**. Please let us know if you are taking any of these medications.
- **If your allergist requires you to carry an Epi-pen, you must have it with you in order to receive your allergy injection.** You must have your Epi-pen on hand and show it to the nurse before injection will be administered. A prescription for Epi-pen will be provided, if necessary, at the time of the initial exam.
- **You are required to wait 30 minutes after every injection.** After 30 minutes, the nurse will check the injection site(s) for signs of localized reaction. If a reaction is noted, your physician will be notified and dosage will be adjusted according to your physician's instructions. **Failure to stay the full 30 minutes following injection on any one occasion will result in dismissal from this service and your vials will be sent back to your physician.** Nearly all serious reactions begin within 5-20 minutes after the injection is given. **Inform the nurse immediately if you are having any itching, hives, coughing, sneezing, tightness in your or throat, wheezing, or difficulty breathing.** If these symptoms occur after your departure, you should administer Epi-pen and call 911.
- All delayed reactions must be reported to the nurse before you receive your next injection. Local reactions consist of swelling and itching at the injection site. Please note the size of the swelling, redness, and any itching at the site.
- If you discontinue the treatment or fail to appear for treatment for a period of 90 days, your vial will be put on hold, and may be sent back to your doctor or discarded.

INFORMED CONSENT FOR ADMINISTRATION OF ALLERGY IMMUNOTHERAPY

I have read and understand the information in the above Allergy Immunotherapy-Important Information section. I have had the opportunity to discuss these instructions with NKU-HCSW staff and agree to follow them.

Patient Signature _____ **Date** _____

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