

Sewanee Pediatrics and Adolescent Medicine

PATIENT _____

DATE _____

ALLERGY INJECTION CONSENT FORM

Allergy shots are recommended after evaluation by an allergist to reduce sensitivity to allergens that cannot be adequately avoided. The allergy shot contains the allergens that are found on skin testing that cause symptoms. Initially, the shot is very weak, then it is gradually increased. By doing this, we can build up a tolerance so you or your child can tolerate larger and longer exposures without developing symptoms or needing as much medication to control symptoms.

Rarely a patient will experience an adverse reaction to allergy shots. Usually these are mild, such as local reactions at the injection site resulting in itching, redness, swelling, or soreness. If there is a more significant reaction, we will communicate with your/your child's allergist and based on their recommendation, may adjust the dose, concentration, content, or technique of administering the shot.

Rarely, a patient may experience a life threatening reaction to an allergy shot known as anaphylaxis, which includes hives, swelling, congestion, itching, coughing, throat irritation, difficulty breathing, fainting and shock. After exposure to an allergen, symptoms of anaphylaxis usually begin within 30 minutes. In the last 50 years, among the millions of patients that have been treated with allergy shots in the US, there have been 24 documented fatalities. Most of these patients had a risk factor such as use of certain medications or unstable asthma. Allergic patients with asthma should check their peak expiratory flow value before receiving an allergy shot. If a patient is on certain medications then allergy shots are not recommended. Although the risk of a serious reaction is very small, to ensure your/your child's safety, all allergy shots are given in a physician's office, followed by a 30 minute observation period.

Many patients with allergies benefit from allergy shots. Most commonly, allergy shots are given weekly for the first year, then every other week for the next 12-18 months, then every three to four weeks for the next 18-24 months. It may take 6-12 months to notice significant relief from allergy symptoms. After this time, many patients are gradually weaned from allergy medication. If there is no clear improvement after 18-24 months, then we recommend that you consult with the allergist to determine if allergy shots should be discontinued.

If the allergist has recommended allergy shots, we are happy to administer the shots in our office. To ensure your/your child's safety we require the following:

1. An initial visit with one of our pediatricians or our pediatric nurse practitioner to review your/your child's history, perform an examination, review the records from the allergist, and obtain consent to administer allergy shots.
2. The first allergy shot needs to be administered in the allergist's office. Additionally, the patient will receive the first dose of each new vial at the allergist's office.
3. You may store the allergy shot serum at our office in a monitored, temperature controlled refrigerator, designated for this purpose.

4. Allergy injections are only given in accordance with the written instructions signed by the allergist. Such instructions must include a clearly intelligible dosage schedule for each antigen or mixture, indicating the amount to be administered and the interval between injections.
5. Each vial must be labeled with sufficient information to distinguish it from other vials dispensed to the same patient and to allow for accurate interpretation of the directions.
6. If the labels or the instructions are not clear, allergy shots cannot be administered until clarification is obtained **in writing** from the prescribing physician. These orders can be faxed to Sewanee Pediatrics. Word of mouth instructions from the patient or parent or telephoned instructions from the allergist are never acceptable.
7. Allergy shots are administered only during regular business hours when a physician is on site. No allergy shot can be administered if a physician is not in the office.
8. Prior to receiving an allergy shot, the patient/parent must inform the nurse of the following:
 - a. A delayed reaction to any prior allergy injection.
 - b. Any current illness within the last week.
 - c. Any new medications.
 - d. Any new or increased allergy or asthma symptoms.
9. After receiving an allergy shot, the patient must remain in the office at Sewanee Pediatrics for at least 30 minutes and be checked out by one of the nurses before leaving. Any patient who refuses to comply with this safety measure will not be able to continue to receive allergy shots at Sewanee Pediatrics.
10. In the event of a reaction to an allergy shot, the nurse will immediately consult with one of our pediatricians for treatment. This will require an immediate evaluation by one of our pediatricians or the pediatric nurse practitioner, possible consultation with the allergist, and written instructions before any further allergy shot are administered.
11. If the time since the last allergy shot is twice the prescribed interval or more, no further allergy shots will be given without a written order from the allergist, indicating either continuation of the original schedule or a revision of the dosage. If the patient is a student who has received allergy shots at another office during vacation or school breaks, it is the patient/parent's responsibility to provide the written documentation of allergy shots administered at the other office before continuing allergy shots at Sewanee Pediatrics.
12. As a courtesy, when it is time to reorder the vials, we will fax the order to the allergist. It is the patient/parent's responsibility to pick them up from the allergist and deliver them to Sewanee Pediatrics. The receptionist will notify the nurse that new vials have been delivered.
13. Sewanee Pediatrics and Adolescent Medicine reserves the right to decline to administer allergy shots, or to discontinue allergy shots, to any patient, for any reason, at any time. Sewanee Pediatrics and Adolescent Medicine and its employees cannot be responsible for adverse consequences of allergy injections administered in compliance with the allergist's orders, or for loss of allergy serum stored at Sewanee Pediatrics.
14. If you become pregnant, please inform the nurse and your allergist prior to your next allergy injection.
15. Notify the nurse if you are on any medications for eye problems, headaches, depression, or elevated blood pressure. Medications for these conditions, such as beta blockers, MAO inhibitors, or ACE inhibitors can increase the risk of a reaction, including anaphylaxis. If you have been prescribed any of these medications, or you are not certain, it is imperative that you inform the nurse before receiving any allergy injections.

ALLERGY SHOT PROTOCOL

1. Two nurses will review the injection schedule from the allergist and confirm the appropriate vial and dose to be administered. The nurse will verify the number of boxes of serum that are in the refrigerator for the patient.
2. The nurse will obtain a peak flow on all patients with asthma.
3. Before receiving the injection, the patient/parent should expect to see the vial and confirm that the correct vial and dose is being administered. The nurse will verify with the patient/parent when the last injection was received.
4. The nurse will draw up the serum in the presence of the patient/parent and review the color of the vial(s) and the dose(s) to be administered.
5. Our policy is to alternate between the arms to minimize the risk of a reaction.
6. The nurse will document on the injection schedule the vial, the dose, the arm, and if there was any reaction.
7. Avoid rubbing or scratching the arms after receiving an injection.
8. Avoid vigorous exercise after injections, such as jogging, gym workouts, etc, for 2 - 4 hours.
9. Bring an antihistamine medication with you when you receive an injection at our office as recommended by your allergist.
- 10. The patient must have the injection sites checked by a nurse, 30 minutes after the injection, and must remain in the office at Sewanee Pediatrics during this 30 minutes. There are no exceptions to this policy.**
11. While waiting to have the injection site checked, please notify the nurse if you experience any of the following: runny nose, itching, shortness of breath, nasal congestion, wheezing, flushing, facial swelling, sneezing hives, coughing, anxiety, "pins and needles" sensation in the skin.
12. If there is a reaction, the nurse that administered the shot will communicate with the allergist's office and inform them of the vial use, dose administered, and the reaction. The nurse will ask for written recommendations for how to proceed.
13. If there is a reaction, your child may need to be seen by one of our pediatricians or the pediatric nurse practitioner.
14. Although you/your child may not experience any reaction within the 30 minutes, it is possible to react later in the day. For this reason we recommend an epinephrine self-injector.
 - a. If a local reaction occurs:
 - i. Take an antihistamine.
 - ii. Apply ice and over the counter hydrocortisone to the injection site.
 - iii. Record the time, size, and duration of the reaction and report this to the nurse before receiving any additional injections.
 - b. If your symptoms continue or worsen do all of the following:
 - i. Administer your epinephrine self-injector as directed by your allergist.
 - ii. Take over the counter liquid Benadryl orally as directed on the label.
 - iii. Call 911
15. Allergy injections will never be given without a physician present in the office. This is for your/your child's safety.

Patient/Parent/Guardian Signature _____ Date _____

Copy and give to parent _____ (initial that this is was done)