

CLINICAL INDICATIONS FOR ALLERGEN IMMUNOTHERAPY

Patient.s Name:

Last Name: _____ First Name: _____ Middle Initial:

Medical Record #: _____

In patients with allergic rhinitis:

Symptoms of allergic rhinitis after natural exposure to aeroallergens, demonstrable evidence of clinically relevant specific immunoglobulin (IgE) antibodies and one of the following;

- _____ Poor response to pharmacotherapy or allergen avoidance.
- _____ Unacceptable adverse effects of medications.
- _____ Desire to avoid long-term pharmacotherapy and reduce the cost of medication.
- _____ Co-existing allergic rhinitis and allergic asthma.
- _____ Possible prevention of asthma.

Comments:

In patients with allergic asthma:

Symptoms of asthma after natural exposure to aeroallergens, demonstrable evidence of clinically relevant specific immunoglobulin (IgE) antibodies, and one of the following:

- _____ Poor response to pharmacotherapy or allergen avoidance.
- _____ Unacceptable adverse effects of medications.
- _____ Desire to avoid long-term pharmacotherapy and reduce the cost of medication.
- _____ Co-existing allergic rhinitis and allergic asthma.

Comments:

In patients with reactions to hymenoptera sting:

- _____ Any age: history of a systemic reaction to a hymenoptera sting (especially if the reaction was associated with respiratory or cardiovascular symptoms) and demonstrable evidence of clinically relevant specific IgE antibodies.
- _____ Age: Over 16 years: History of a systemic reaction limited to the skin, and demonstrable evidence of clinically relevant specific IgE antibodies.
- _____ History of a systemic reaction to imported fire ant and demonstrable evidence of clinically relevant specific IgE antibodies.

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Patients younger than 16 years who present with a history of only cutaneous symptoms to hymenoptera stings may not require immunotherapy. If immunotherapy is required, comments are necessary.

Comments:
