

PATIENT INSTRUCTION/INFORMED CONSENT SHEET - ALLERGY SKIN  
TESTING  
MAINLAND ALLERGY CLINIC

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PATIENT PRINTED NAME \_\_\_\_\_

**Skin Test:** Skin tests are a method of testing for allergic antibodies. A test consists of introducing small amounts of the suspected substance, or allergen, into the skin and noting the development of a positive reaction (which consists of a wheal, swelling, or flare in the surrounding area of redness). The results are read 15 to 20 minutes after application of the allergen. Skin tests are generally performed by the nurses. The skin test methods used are:

**Prick Method:** The skin is pricked with a multi-prong plastic device which has the allergen solution on it. This test consists of approximately 70 allergens.

**Intradermal Method:** This method consists of injecting small amounts of an allergen into the superficial layers of the skin with a needle. Generally, this test can include up to 30 allergens.

Interpreting the clinical significance of skin tests requires skillful correlation of the test results with the patient's clinical history. Positive tests indicate the presence of allergenic antibodies and are not necessarily correlated with clinical symptoms. You will be skin tested to important Texas Gulfcoast airborne allergens and some foods. These include trees, grasses, weeds, molds, dust mites, danders, and foods (milk, egg, shellfish, peanut, and a few others). The skin testing generally takes 1-1/2 hours. Prick tests will be performed on your back and intradermal tests on your arm. If you have a specific allergic sensitivity to one of the allergens, a red, raised, itchy hive (caused by histamine release into the skin) will appear on your skin within 15-20 minutes. The reactivity for the intradermal testing will need to be assessed again 24 hours after the initial testing. You will be expected to interpret the reactions after you leave the office. You are expected to fax or call the results back to the office within 24 hours of the last interpretation (reading). The nurse will assist you at the time of testing in making sure you are comfortable in doing the interpretations at home. You have the option to return to the office for the later interpretations. These positive reactions will gradually disappear and typically, minimal treatment is necessary to control the itchiness. Occasionally, local swelling at a test site will persist after the skin tests are completed, particularly at sites of intradermal testing. These reactions are not serious and will disappear over the next few weeks or so. You may be scheduled for skin testing to antibiotics, local anesthetics, venoms, or other biological agents, and the same guidelines apply.

## **DO NOT**

1. No prescription or over-the-counter antihistamines should be used 4-5 days prior to the scheduled skin testing. These include cold tablets, sinus tablets, hay fever medications, or oral treatments for itchy skin. Some of the names of these drugs include Actifed, Drixoral, Dimetapp, Dristan, Benadryl, Tylenol Cold and Sinus, Chlortrimeton, Claritin, Clarinex, Allegra, Zyrtec, Xyzal and many others. If you have any questions about what to avoid, please ask the nurse or the doctor.
2. Medications such as over-the-counter sleeping medicines (eg. Nytol, Tylenol PM), stomach medications (Pepcid, Zantac) and other prescribed drugs, such as amitriptyline (Elavil), hydroxyzine (Atarax), doxepin (Sinequan), and imipramine (Tofranil) have antihistaminic activity and should be discontinued at least 2 weeks prior to receiving skin tests. Please make the doctor and nurse aware of the fact that you are taking these medications so that you may be advised as to how long prior to testing you should stop taking them.
3. Steroids should be avoided prior to skin testing. Oral steroids like Prednisone should be completed at least 7 days prior to skin testing. Injected steroids like Depo Medrol should not be taken within 2 weeks of skin testing.

## **YOU MAY**

1. You may continue on your intranasal allergy sprays such as Nasonex, Flonase, Rhinocort, Nasacort, Beconase, or Nasarel. Afrin or Sudafed may be used temporarily but not on the day of testing.
2. Asthma inhalers (Qvar, Aerobid, Atrovent, Azmacort, Advair, Flovent, albuterol (Proventil, Ventolin)) and oral theophylline (uniphyl, Theo-24) do not interfere with skin testing and should be used as prescribed. Singularair may also continue to be taken.
2. Most drugs do not interfere with skin testing but make certain that your physician and nurse know about every drug you are taking.

Please let the physician and nurse know:

1. If you are taking any beta blockers or anti-depressants.
2. If you are pregnant.
3. If you have a fever or wheezing.
4. Any medications you are taking (bring a list of medications currently taking).

Skin testing will be administered at this medical facility with a medical personnel present since occasional reactions may require immediate therapy. These reactions may consist of any or all of the following symptoms: itchy eyes, itchy nose, itchy throat, nasal congestion, runny nose, tightness in the throat or chest, increased wheezing,

lightheadedness, faintness, nausea and vomiting, hives, generalized itching, and shock, the latter under extreme circumstances. PLEASE NOTE THAT THESE REACTIONS RARELY OCCUR BUT IN THE EVENT A REACTION WOULD OCCUR, THE STAFF IS FULLY TRAINED AND EMERGENCY EQUIPMENT IS AVAILABLE.

The alternative to skin testing is to do no testing and treat the allergy symptoms with medications or do RAST (blood testing). Blood tests are generally not felt to be as useful and are done only under certain circumstances.

For pediatric patients, an anesthetizing cream can be used on the arms and should be used 2 hours prior to testing. This cream would be applied at home by the parent prior to the scheduled testing and is only used for the intradermal testing.

About one week after skin testing, you will meet with Dr. Andrew or Mr. Ward Prentice, PA who will make further recommendations regarding your treatment.

We request that you do not bring small children with you when you are scheduled for skin testing unless they are accompanied by another adult who can sit with them in the reception room.

In the unlikely event of an accidental exposure (the person performing the skin tests would accidentally get a needle stick, cut, or have exposure to your blood or any of the objects used in performing the skin tests (syringes, plastic prick devices), you would be requested to have blood drawn to determine if our employee would need further medical treatment in regards to hepatitis and HIV. Should this occur, our employee would also have blood drawn for these same lab tests.

**IF FOR ANY REASON YOU NEED TO CHANGE YOUR SKIN TEST APPOINTMENT, PLEASE GIVE US AT LEAST 48 HOURS NOTICE. DUE TO THE LENGTH OF TIME SCHEDULED FOR SKIN TESTING, A LAST MINUTE CHANGE RESULTS IN LOSS OF VALUABLE TIME THAT ANOTHER PATIENT MIGHT HAVE UTILIZED.**

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I have read the patient information sheet on allergy skin testing and understand it. The opportunity has been provided for me to ask questions regarding the potential side effects of allergy skin testing and these questions have been answered to my satisfaction. I understand that every precaution consistent with the best medical practice will be carried out to protect me against such reactions.

Patient Signature \_\_\_\_\_ Date: \_\_\_\_\_

Guardian Signature (in case of minor) \_\_\_\_\_ Date: \_\_\_\_\_

Professional explaining and witnessing consent: \_\_\_\_\_