

Shelley Berson, MD, FAASM, FAAOA
Rockland Ear, Nose and Throat Associates, P.C.
2 Strawtown Road #6, West Nyack, NY 10994
845-727-1340 | 845-727-1349 Fax

ALLERGY TESTING EVALUATION

Name: _____ Date: _____

- 1. Are you taking Beta Blockers or anti-depressants? Yes No
- 2. Have you had any upper extremity lymph node dissections/ Breast Cancer? Yes No
- 3. Please list current medications (including OTC/herbal): _____
- 4. What medications have you tried for allergies? _____
- 5. Have you had nasal/sinus or ear surgery? Yes No _____
- 6. Have you ever had allergy testing or allergy shots? Yes No
- 7. What do you think you might be allergic to? _____
- 8. Do you have a history of fainting or passing out? Yes No
- 9. Please check off all of the allergy symptoms you are experiencing:

- | | | | |
|-------------------|----------------|-----------------|------------------|
| Stuffy Nose | Runny Nose | Sneezing | Itchy Nose |
| Sore/Itchy Throat | Red/Itchy Eyes | Throat Clearing | Cough |
| Headache | Skin Rashes | Itchy Ears | Sinus Infections |
| Post-nasal Drip | Laryngitis | Hoarseness | Hives |

What is the impact on your quality of life (scale from 1-10) _____

- 10. Is there a family history of allergies? Yes No
- 11. Do you smoke or are you exposed to smoke on a regular basis? Yes No
- 12. Are you exposed to pets often? Yes No (Dogs, Cats, Birds) _____
- 13. Do you work or live in a damp environment? Yes No
- 14. When are your symptoms worse? Morning Evening All day
- 15. Where are your symptoms worse? Indoors Outdoors
- 16. Do your rooms have: rugs feather pillows plants?
- 17. Have you tried mattress/pillow covers or air purifiers? Yes No
- 18. Are there any foods you cannot eat? What, and what happens?

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CONSENT TO ALLERGY TESTING, EVALUATION, TREATMENT

Under the direct supervision of: **Shelley R. Berson, MD**

I consent to:

- The testing procedure and treatment.
- Such procedures and treatment in addition to or different from those contemplated whether or not arising from presently unforeseen conditions, which the above named doctor or her associates or assistants may consider necessary or advisable in the course of testing or treatment procedures.
- The administration of such medications as may be considered necessary or advisable by the doctor or associates or assistants responsible for this service.
- The admittance of observers to the room for the purpose of advancing medical education.
- I have been explained the nature of all testing and treatment procedures, possible alternative methods of treatment, the risks involved with this treatment, and the possibility of complications such as: localized swelling, irritation, and itching at the injection site. A delayed localized reaction for up to a week after is also possible. The patient may also experience an increase in his/her allergic symptoms, generalized (whole body) hives and swelling, difficulty breathing, anaphylactic shock, and possible death. **No guarantee or assurance has been given by anyone as to the results that may be obtained.**
- I certify that I have read and fully understand the above consent testing and treatment.

Patient Name: _____

Date: _____

Signature: _____

The foregoing consent was read, discussed, and signed in my presence, and in my opinion the person so signing did freely with full knowledge and understanding.

Signature of Witness: _____

Date: _____

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ALLERGY TESTING

Allergy testing is comprised of usually one, but sometimes two appointments. The first test is a screening test called “multitest” which is performed by pricking the surface of the skin on both forearms with 40 indoor/outdoor airborne allergens. This will tell us if you are allergic at all. This will take about 40 minutes to an hour of your time, as you will see the doctor to discuss your results. Sometimes we follow up with a second testing appointment. This is called MQT (Modified Quantitative Testing) to see how allergic you might be. This entails a series of small injections under the skin of your upper arms and will require an hour and a half including the visit with the doctor. We also offer testing for food allergies; which is the same multitest device. We also may want to obtain blood work, such as a RAST test, if deemed appropriate.

For all of the above testing procedures, we ask that you wear short-sleeved or a loose fitting top so we can access both arms. Make sure that you **have** eaten within 2 hours of testing and that you **have not** exercised heavily within 2 hours of testing.

DO NOT TAKE ANY ANTIHISTAMINE MEDICATIONS at least five days prior to testing (they may interfere with the test results). Some examples are:

Advil Cold & Sinus	Clarinet	
Advil PM	Claritin	Phenergan
Alavert	Coricidin	Sudafed
Alka-Seltzer Sinus	Dimetapp	Triaminic
Allerst	Dymista	Tylenol Allergy Sinus
Allegra	Diphenhydramine	Tylenol Allergy Plus
Astelin/Astepro	Fexofenadine	Tylenol PM
Antivert	Hydroxyzine	Unisom
Atarax	Loratadine	Veramyst
Azelastine	Levocetirizine	Vistaril
Benadryl	Optivar	Xyzal
Cetirizine	Patanase	Zaditor
Chlor-Trimeton	Patanol	Zyrtec

PLEASE INFORM US IF YOU ARE ON A **BETA BLOCKER** (anti-hypertensive medication for blood pressure). Some examples are:

Acebutolol	Carvedilol	Labetolol	Sotalol
Atenolol	Coreg	Levatol	Tenoretic
Betapace	Corgard	Lopressor	Tenormin
Betaxol	Esmolol	Metropolol	Tenoretic
Bisoprolol	Inderal	Nadolol	Toprol XL
Brevibloc	InnoPran XL	Propranolol	Trandate
Bystolic	Kerlone	Sectral	Zebeta

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Allergy testing is a way to detect whether or not the immune system has developed an abnormally high response to certain substances. The immune reactions caused by airborne allergens such as dust, ragweed, pollen, and animal dander are well understood and relatively easy to diagnose and treat. However, the immune reactions are caused by other allergens such as industrial chemicals, pollution, molds, and foods are more complex and difficult to accurately diagnose and treat with standard techniques. Although a number of methods are in use today to identify specific allergens, they all fall into 2 basic groups:

1. **SKIN TESTING** – A preliminary screening test, where a small amount of the suspected allergen is introduced into the upper surface of the skin (on the forearms). It takes about 15-20 minutes and can help decide whether or not further testing should be done. One of the most common skin tests used today is called Intradermal Dilution Testing (IDT) where a series of small injections, using very small needles, is made in rows on the upper part of both arms. This test takes about an hour and there is very little discomfort from it. Only a small amount of the allergen being tested is injected and the result is a series of bumps, which look like small mosquito bites. If the bumps enlarge significantly in a period of time, it indicates that the person is likely allergic to the allergen. If one receives immunotherapy (allergy shots), the proper dosing will be based on the results from this test.
2. **BLOOD TESTING (RAST)** – Using a small amount of blood, this test can be used to measure increased levels of allergen antibodies. Although the results of this test are not available immediately, as with skin testing, only one sample of blood is required to test for many allergens. This test is most useful in children and in those people who have certain contraindications which prevent skin testing.

How are allergies treated?

1. **AVOIDANCE** – The first, most basic, treatment once an allergen has been identified is to take steps to avoid or eliminate it in your environment. Sometimes very simple, inexpensive measures can produce a significant improvement in your symptoms from allergy. However, because some allergens, such as mold, animals and pollen, are difficult to avoid, these steps alone may not be sufficient.
2. **MEDICATION** – These include antihistamines, decongestants, and nasal steroids. However, because many of these medications can produce side effects, long-term use is not recommended.
3. **IMMUNOTHERAPY** – When allergen avoidance and medication are not sufficient to control allergy symptoms, immunotherapy is another option. This is done by strengthening the body's immune system with regular injections of the actual allergens that cause the symptoms. This is very similar to vaccinating a person against a disease such as the flu shot. The symptoms will usually improve after a short period of time, and over the next 3-5 years the body can actually become less sensitive to the allergen.