Immunotherapy Agreement and Consent Form

Thank you for choosing Creighton University Student Health Services (SHS) to provide your immunotherapy (allergy injections). In order for us to provide the highest level of care, patients receiving allergy injections must agree to the following:

- **Information about allergy injections at SHS:**
  - Allergy injections are available by appointments only. Call 402-280-2735 to speak with a nurse about beginning the process in our office. Our allergy nurse will work with you to coordinate a weekly schedule for allergy injections.
  - Initial immunotherapy injections must be administered at the prescribing physician’s office, under the care of the prescribing physician. Before providing allergy injections in our office, we must receive the physician agreement signed by your allergist.
  - Allergy injection instructions from your allergist must be current and clear. Allergy injections will be administered according to the order of the prescribing physician. Any deviation from the written schedule must be obtained from the ordering physician.
  - Serum must be labeled with the patient name and prescribing physician. Allergy serum will be stored in a temperature controlled refrigerator at SHS.
  - Allergy serum will be ordered by our allergy nurse, and the student’s insurance will be billed accordingly. If there is no coverage for serum, you assume responsibility for this cost.
  - You will be charged $21.00 for one injection or $29.00 for 2 or more injections. The cost will be submitted to your insurance. If not covered by your insurance, these charges will be your responsibility. Injection cost is subject to change.

- **Advice to consider before getting an allergy injection at SHS:**
  - If you think you may be allergic to any particular food, please avoid that food for 24 hours before your injection to lessen the chance of a reaction.
  - At every allergy injection visit, please report any reaction to the preceding allergy injection before the next is given. It is most helpful to have any reaction reported to the allergy nurse prior to the next scheduled allergy appointment.
  - Please call to reschedule your injection if you are ill, have a fever, cold symptoms or severe allergy symptoms.
  - Some allergists restrict exercise for several hours before and several hours after an allergy injection. Follow the recommendation of your allergist.
  - If your allergist advises that you be pretreated with an antihistamine, it is your responsibility to follow those instructions.
  - If you receive a flu shot, tetanus shot, or any other type of immunization, wait 24 hours before receiving an allergy injection.
If you are pregnant or suspect you are pregnant, please notify our allergy nurse and your allergist immediately.

You should not be taking medications called beta blockers for other medical problems while receiving allergy injections. These medications can reduce the effectiveness of epinephrine. If you are prescribed any new medications, you must report them to the allergy nurse at your next visit.

### After your allergy injection at SHS:

- **It is mandatory** that you wait a minimum of 30 minutes following your injection before leaving the clinic. If you cannot wait the prescribed observation time, please reschedule your appointment.

- **Local reactions:** A local reaction consists of swelling, redness and itching at or near the site of the injection. Avoid rubbing and/or scratching the area of the injection. If later in the day you develop swelling at the site, you may apply ice to the area. Rest your arm for the remainder of the day and do not exercise. All local reactions should be reported to the allergy nurse so that the dose of the next allergy injection can be adjusted, if indicated. SHS staff will contact your allergist to report significant local reactions and to obtain further direction.

- **Systemic reactions:** Signs of a systemic reaction may include: itching of the throat, nose, eyes, palms or skin; hives; sneezing; runny nose; coughing; wheezing; chest tightness; abdominal cramping; swelling or redness of the face or other areas of the body; sweating; dizziness; or weakness. Most severe reactions occur shortly after the injection. This is why you must wait in the office for at least 30 minutes after each injection. If you notice any of these symptoms within the first 30 minutes, report to the allergy nurse at once. If symptoms occur outside of SHS, take an over-the-counter antihistamine (e.g., Claritin or Benadryl). If the symptoms continue or worsen, return to SHS or go to the nearest emergency department. If symptoms are severe, call Public Safety at 402-280-2911. If you feel you are having a severe allergic reaction and you have your Epi-pen, administer a dose. SHS staff will contact your allergist to report the reaction and to obtain further direction.

I have read and understand the above information and agree to abide by these terms in order to receive allergy injections at SHS. I understand that if I fail to follow these terms, SHS reserves the right to discontinue the administration of my immunotherapy.

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Patient Name                  DOB

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Patient Signature (Parent if under age 19)  Date