



Family Allergy & Asthma Care Consultants LLC

Board Certified Allergy & Asthma Care

Shankar Lakhani, MD

Diplomate, ABAI, ABP

Consent for Out of Office Administration of Allergy Shots

Allergy sufferers frequently ask if a friend or family member can administer their allergy vaccine at home. Because allergy shots can cause allergic reactions, which can rarely be severe and potentially fatal, these shots are best administered at a physician's office or other similar location where emergency equipment and trained personnel are immediately available.

Circumstances do arise; however, when getting shots in such a setting is not possible. In such circumstances, provided certain safety measures are met, the benefits of receiving a shot program may outweigh the small increase in risk that is assumed when shots are taken home.

The following minimum safety measures that this office considers essential for home allergy shot administration.

- Allergy shots should never be **self-administered**.
- Allergy shots should only be given when asthma is under excellent control.
- An individual with medical training and experience (i.e. MD or RN) must give the injection and remain in the vicinity for 20 minutes.
- A current Epi-pen or equivalent must be on hand and its use reviewed periodically (every 3 months).
- Benadryl syrup must be on hand. (Dose Adult: 4-5 tsp., Child 2-4 tsp.)
- Emergency medical services must be quickly accessible (a telephone is present and response time is short)

In signing this document, I acknowledge:

- I have read the above information.
- I am unable to receive the allergy shots in a physician's office.
- All of the above safety measures will be observed.
- The potential risks of severe allergic reaction have been explained and all questions have been answered.
- I have received a copy of the emergency procedure instructions.

Pt name printed: _____ D.O.B. _____

Signed: _____ Date: _____
Patient or patient's parent or guardian

Person who will administer shots Medical Training Contact # Date: _____

200 Banning Street, Suite 280, Eden Hill Medical Center, Dover, De 19904.
Phone: 302-734-4434, fax: 302-734-4432



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IMMUNOTHERAPY PROGRAM-INSTRUCTIONS FOR ADMINISTRATION (1)

NAME: _____ DATE: _____

General Instructions:

Please administer in a doctor's office or medical facility. Keep allergen vial refrigerated. (Do Not Freeze). Ask if the patient is actually experiencing wheezing, fever, or an upper respiratory infection, if positive, postpone injection for the following week or until patient is recovered. Review the reaction to the last allergen administration and adjust the dose accordingly if necessary as follows:

ADJUST DOSE ACCORDING TO LAST REACTION:

Local only: They respond to the administration of an anti-histamine and local application of ice. A lump or swelling with erythema is not as significant as lump with a wheal (a wheal has a hive-like appearance). The wheal is the most significant part of the local reaction. If the wheal is...

1. Negative: Swelling up to 15mm (dime size), progress according to schedule.
2. Swelling: 15-20mm (dime to nickel size), repeat last dose.
3. Swelling: 20-25mm (nickel to quarter size), return to last dosage which caused no reaction.
4. Swelling: 25mm (quarter size or larger), itching and persisting for more than 12 hours: reduce dose by 50%*

- If reduced dosage is tolerated, increase dose by 0.05 to 0.1ml weekly and resume schedule.

Systemic Reaction: Can occur occasionally in the course of treating allergic patients. Almost all reactions occur within 30 minutes after the injection. Symptoms may include: itching of the palms of the hands or other parts of the body, sneezing, coughing, hives (welts), swelling of the lips or other areas, and shortness of breath. Give anti-histamine for itching and hay fever symptoms. For wheezing alone, give 2 puffs of albuterol or by nebulization. With severe reactions, acute asthma or drop in blood pressure (anaphylaxis) can occur. At the first sign of a systemic reaction, a tourniquet may be applied above the injection site and epinephrine (1:1000) administered (about 0.2ml for children 6 to 12 years and 0.3ml for adults) SQ, at the site of the immunotherapy injection. Epinephrine should be repeated if marked improvement does not occur within minutes. After a systemic reaction, additional injections should not be given. Patient needs to be reevaluated at our office.

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IMMUNOTHERAPY PROGRAM-INSTRUCTIONS FOR ADMINISTRATION (2)

NAME: _____ DATE: _____

Technique of Administration:

Use a 1ml disposable syringe, graduated to 0.01ml and 26 to 27 gauge (3/8 inch) needle. Carefully withdraw the proper amount from the appropriate vial. The amount of allergen should be adjusted while the needle remains inside the vial, then wipe off the needle with an alcohol swab. Cleanse the lateral posterior fleshy part of the upper arm with an alcohol swab, and administer the injection subcutaneously. Do not massage the area. *Patient must remain under direct observation for 30 minutes if he/she is asthmatic or receives insect venom and 20 minutes if he/she receives inhalant allergen for 'hayfever'.* Do not administer expired allergen extracts.

Missed Injections:

During build-up series-

1. Up to 7 days, continues as scheduled.
 2. 8-13 days, repeat previous dose.
 3. 14-21 days, reduce previous dose by 25%*
 4. 22-28 days, reduce previous dose by 50%*
- * The subsequent injections will be given weekly, according to the buildup dose schedule.

During Maintenance-

1. >21 but <29 days, continue same dose.
2. 30 to 35 days, half the dose = **0.25 then 3-7 days 0.5 then q 21-28 days**
3. 36 to 41 days, give 1/3 of the dose = **0.1 then 3-7 days 0.3 then 3-7 days 0.5 then q 21-28 days**
4. >42 days, call office!

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