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| --- | --- | --- |
| Allergy Testing | Date of test: | |
| Packet items:   1. How to prepare 2. Billing and insurance 3. Frequently asked questions | |  |

PREPARATION FOR ALLERGY TESTING

**In order to obtain valid and useful skin testing results, you need to discontinue the use of certain medications for the designated times below before your appointment.**

Please note that if you take Beta Blockers you will not be able to have allergy skin testing or injections.

Stop use seven days prior:

|  |  |
| --- | --- |
| Claritin ( Loratidine ) | Allegra ( Fexofenadine ) |
| Clarinex ( Desloratadine ) | Zyrtec ( Cetirizine ) |
| Benadryl ( Diphenhydramine ) | Any OTC sinus/cold medicines |

Stop use three days prior oral:

|  |  |  |  |
| --- | --- | --- | --- |
| Actifed | Dimetapp | Nolahist | Ru-Tuss |
| Atarax | Dramamine | Novahistine | Tagamet |
| Atrohist | Excedrin PM | Nolamine | Tavist I |
| Benadryl | Isoclor | Optimine | Tavist II |
| Chlorpheniramine | Kronofed A (Jr) | Phenergan | Teldrin |
| Chlor-Trimenton | Marax | Poly-Histine | Tylenol PM |
| Comhist | Midol PM | Ritalin | Zantac |
| Deconamine | Naldecon | Rondec | Zyrtec |

|  |  |  |  |
| --- | --- | --- | --- |
| **You may not participate if you take the following** | | | |
| **Brand Name** | Generic Name | **Brand name** | Generic Name |
| **Betachron** | Propranolol | **Metipranolol** | Metoprolol |
| **Betagan (Eye Drops)** | Levobunolol | **Normodyne** | Labetalol |
| **Betimol (Eye Drops)** | Timolol | **Ocupress (Eye Drops)** | Carteolol Hydrochloride |
| **Betoptic (Eye Drops)** | Betaxolol Hydrochloride | **Optipranolol (Eye Drops)** | Metipranololetaxolol Hydrochloride |
| **Betoptic S (Eye Drops)** | Betaxolol | **Sectral** | Acebutolol |
| **Blocadren** | Timolol | **Tenoretic** | Atenolol & Chlorthalidone |
| **Bystolic** |  | **Tenormin** | Atenolol |
| **Cartrol** | Carteolol | **Timolide** | Timolol & Hydrochlorothiazide |
| **Coreg** | Carvedilol | **Timoptic (Eye Drops)** | Timolol |
| **Corgard** | Nadolol | **Timoptic XE (Eye Drops)** | Timolol Gel Forming |
| **Corzide** | Nadolol & Bendroflumethlazide | **Toprol XL** | Metoprolol |
| **Inderal (LA)** | Propranolol | **Trandate** | Labetalol |
| **Interide (LA)** | Propranolol & Hydrochlorothiazide | **Trusopt (Eye Drops)** | Dorzolamide Hydrochloride |
| **Innopran XL** | Propranolol | **Visken** | Pindolol |
| **Istalol (Eye Drops)** | No Generic | **Zebeta** | Bisoprolol |
| **Levatol** | Penbutolol | **Ziac** | Bisoprolol & Hydrochlorothiazide |
| **Lopressor** | Metoprolol | **Metipranolol** | Metoprolol |
| **Lopressor HCT** | Metoprolol & Hydrochlorothiazide | **Normodyne** | Labetalol |

BILLING INFORMATION

We recommend that you contact your insurance company before any testing or immunotherapy is administered to see if this is a covered benefit. Completing the following will give you an idea of what you will be responsible for.

CPT code = Current Procedural Terminology

These allow your insurance to inform you what they will cover

What to ask when you call:

1. Do you cover allergy testing?
   1. CPT codes:
      1. Skin testing: 95004, 95024, 95027
         1. These are important for the actual allergy test
      2. Mixing for injections or drops: 95165
      3. Injections: (single) 95115, (multiple) 95117
         1. These are important if you decide to begin immunotherapy
2. Do I need a referral from my primary care?
3. Is any other prior authorization necessary?
4. **These steps are crucial because the full responsibility of payment will be on you,   
   the patient if your insurance denies your claim.** Our office can help if any   
   predetermination is needed. Insurance companies are variable in their coverage   
   for allergy testing and treatment.

Initials:

1. This process can take anywhere from a few weeks to a few months.   
   This could delay your treatment, and is not a guarantee of payment.

Initials:

1. Once we have received all expected payments from your insurance,   
   you will be billed for the remaining balance and expected to submit   
   payment within **thirty days**.

Initials:

THE SERUM

The serum is a dilute mixture of antigens you receive as either injections or drops under the tongue at regular intervals. These are mixed by the medical assistants based on your individual allergy test.

If you decide to proceed with immunotherapy whether drops or injections you will be   
charged for the mixing of your vials.

Initials:

1. If a vial needs to be re-mixed due to noncompliance you will be   
   responsible for an additional fee will be applied.
2. **If you decide to discontinue immunotherapy for any reason, a written notice  
    is required 30 days in advance to stopping.**

Initials:

Initials:

1. If mixing takes place before the written notice you will still be responsible  
   for payment.
2. Be aware that sublingual drops are not covered by insurance.

Initials:

* 1. Serum preparation for drops is $100 monthly.

I have read, understand, and agree to all of these billing policies.

Signed:

(Patient or responsible party)

Printed:

Date:

FREQUENTLY ASKED QUESTIONS

1. What is allergy testing?
   1. Skin tests for allergic disorders have been around since the 1860s. Today, prick or puncture tests are commonly used by allergists as diagnostic aids. These tests are not very invasive and, for most allergens, they tend to produce quick results. The prick test is followed by intradermal tests, which give allergists more details about what’s causing the underlying symptoms.
2. How is the test administered?
   1. **Prick/puncture.** A diluted allergen is applied with a prick or a puncture on the surface of the skin.
   2. **Intradermal.** Using a 26- to 30-guage (very thin) needle, a diluted allergen is injected immediately underneath the skin surface. We test for 38 local antigens.
3. Who administers the test?
   1. Trained Medical Assistants
4. How long will it take?
   1. It can take up to an hour and a half depending on the individual.
5. My child is the one having the test. Is there anything special that I need?
   1. We call in a topical numbing medication called EMLA cream. You will apply a thick layer to the upper back across the shoulder blades that morning. We recommend covering the area with saran wrap after application.
6. What should I wear?
   1. The preferred attire is a sleeveless shirt because the second portion of the test is done on the upper arm.
7. Can I still do the testing if I become ill beforehand?
   1. It is recommended that you feel healthy and well rested the day of your allergy testing.