



## **WELCOME TO ALLERGY TESTING**

Thank you for being our valued patient. Your provider has recommended that you undergo allergy testing. We are pleased that you are taking a positive step to fight your allergies by scheduling an allergy test with us.

Did you know that allergies can exacerbate ear conditions such as eustachian tube dysfunction, chronic ear disease, Ménière's disease, migraine disease, in addition to nasal and throat symptoms (nasal congestion, nasal drainage, sneezing, sinus inflammation)?

In San Antonio, there are allergens present in every season. Immunotherapy can decrease the symptoms of conditions such as eustachian tube dysfunction, chronic ear disease, Ménière's disease, migraine disease, in addition to nasal and throat symptoms. Some of our immunotherapy patients report a significant reduction in their Ménière's and migraine symptoms. They report a much-improved quality of life!

We hope this information assists you with your decision to schedule an allergy test! Call our friendly staff anytime if we may be of assistance to you.

Thank you.

Dr. Jackson, Dr. Bain, Dr. Bergeron and staff.



# THE EAR INSTITUTE OF TEXAS, P. A.

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Appointment: \_\_\_\_\_

Date: \_\_\_\_\_

Time: \_\_\_\_\_

## IMPORTANT ALLERGY TEST INFORMATION

Allergy testing has been recommended by your medical provider. The cost of this test can vary depending on your insurance carrier and plan. **Please contact your insurance carrier and provide them with the code 95004 for Allergy Testing (70 units) and code 94200A for Peak Flow test to get an estimate of your financial responsibility.** Any patient responsibility will be collected at time of service. **If you cancel less than 48-hours before your scheduled testing appointment, you will be charged a \$75.00 cancellation fee.**

Depending on your allergy test results, allergy treatment (known as Allergy Immunotherapy) might be recommended for you. The codes for the **serum and injections for Allergy Immunotherapy** are **95165 (28 units)** and **95117**, respectively. You can also obtain an estimate of your financial responsibility from your insurance carrier. Payment for the treatment will need to be collected prior to preparation of serum for injections.

You **must not** take any **oral antihistamines** for at **least one week** prior to allergy testing. Antihistamines are found in common allergy relief medications that are sold both over the counter and by prescription only. They can also be found in medications for heartburn and acid reflux, among others. Other types of medications may also interfere with allergy skin test results. Please see the list below for the most common medications that contain antihistamines or might otherwise affect test results. Patients on Immunotherapy, avoid allergy injection the week prior to allergy testing.

**Please note: this is not an all-inclusive list. If you have any questions about medications, please call our office to speak with the allergy department.**

Brand Name (generic name)

### Discontinue taking the following medications prior to allergy test:

Antihistamines 7 days (unless otherwise noted)			Heartburn/Acid reducer (3 days)
Alavert, Claritin (Loratadine)	Xyzal (Levocetirizine)	Tavist/Tavist II (Clemastine)	Pepcid (Famotidine)
Allegra (Fexofenadine)	Benadryl(Diphenhydramine) (5-7 days)	Semprex (Acrivastine)	Zantac (Ranitidine)
Clarinx (Desloratadine)	Chlor-Trimenton, Chlor-tabs (Chlorpheniramine Maleate)	Dimetapp, Bromax (brompheniramine)	Tagament (Cimetidine)
Zyrtec (Cetirizine)	Tekral (Diphenhydramine-pseudoephedrine)	RyVent, Karbinal ER, Palgiv (Carbinoxamine)	Axid (Nizatidine)
Periactin (Cyproheptadine) <b>11 days</b>	Astelin, Dymista (Azelastine) <b>2 days</b>		

### Discontinue prior to allergy test: (\*must contact prescribing doctor for authorization)

Nausea/dizziness (48 hours)	Nerve pain medication/Antianxiety/Antidepressants (7 days)		
Antivert(Meclizine)	*Elavil (Amitriptyline)	*Asendin (Amoxapine)	*Klonopin (Clonazepam)
Atarax, Vistaril (Hydroxyzine)	*Silenor, Sinequan (Doxepin)	*Valium (Diazepam)	*Xanax (Alprazolam)
Phenergan (promethazine)	*Pamelor (Nortriptyline)	*Ativan (Lorazepam)	*Wellbutrin (Bupropion)
Dramamine (Dimenhydrinate)	*Aripiprazole (Abilify)	*Trazodone ( Desyrel) <b>5 days</b>	

### Avoid taking the following medications 48 hours prior to allergy testing:

**\*\*Beta blockers** – medication for **high blood pressure/migraines (SEE LIST on back of this page)**

**\*\*must contact prescribing doctor for authorization**

Over the counter sleep aids, appetite suppressants, diet medications, herbal products, alternative medicines

Medications that are for "allergy relief" or contain "PM": Tylenol PM, Sinus and Allergy, Excedrin PM

**Notify allergy department:** Long term oral corticosteroids, topical glucocorticosteroids **up to 21 days**

## May continue the following:

- Sudafed® or pseudoephedrine
- Steroid nasal sprays (Flonase®, Rhinocort®, Nasonex®, Nasacort®, Nasarel®, Veramyst®, Fluticasone, Omnaris®, Afrin, Trimacinalone, Mometasone, etc.)
- Guaifenesin (Humibid®, Robitussin®, Liquibid®, Profen II Forte®, Duratuss™, Mucinex®)
- Pain medications – OTC and Prescription – (Tylenol® /acetaminophen, Excedrin®, Aleve, Advil® /ibuprofen/Motrin®, Aspirin®) - **As long as they do not contain “PM”**
- Singular® (Montelukast)
- Asthma Inhalers (Albuterol)
- Proton Pump Inhibitors – Esomeprazole, Omeprazole, Lansoprazole, Pantoprazole, Dexlansoprazole, Rabeprazole
- SNRI and SSRI – Duloxetine, Desvenlafaxine, Milnacipran, Venlafaxine, Citalopram (Celexa), Escitalopram, Sertraline (Zoloft), Paroxetine, Fluoxetine, Onlazapine

## List of common Beta Blockers: \*\*

Discontinue 48 hours prior to allergy testing (\*\*must contact prescribing doctor for authorization)

- acebutolol (Sectral)
- atenolol (Tenormin)
- betaxolol (Kerlone)
- betaxolol (Betoptic S)
- bisoprolol fumarate (Zebeta)
- carteolol (Cartrol, discontinued)
- carvedilol (Coreg)
- esmolol (Brevibloc)
- labetalol (Trandate [Normodyne - discontinued])
- metoprolol (Lopressor, Toprol XL)
- nadolol (Corgard)
- nebivolol (Bystolic)
- penbutolol (Levatol)
- pindolol (Visken, discontinued)
- propranolol (Hemangeol, Inderal LA, Inderal XL, InnoPran XL)
- sotalol (Betapace, Sorine)
- timolol (Blocadren, discontinued)
- timolol ophthalmic solution (Timoptic, Betimol, Istalol)

**THE EAR INSTITUTE OF TEXAS P.A.**  
**ALLERGY DEPARTMENT**

**Congratulations on your decision to be allergy tested.**  
**You are taking the first important step on your way to relief from allergens.**

Allergies are the result of a chain reaction that starts in the immune system. Your immune system controls how your body defends itself. If you have an allergy to a substance, such as a type of pollen, your immune system identifies the pollen as an invader. In an allergic individual, the immune system overproduces antibodies called *Immunoglobulin E*. These antibodies attach to an allergen (such as pollen) and also attach to cells that release chemicals (such as histamine) causing an allergic reaction (generally termed *allergic rhinitis*).

Do you suffer from allergic rhinitis? Rhinitis refers to inflammation of the nasal passages. This inflammation may cause a variety of annoying symptoms which vary from person to person. Although the term “rhinitis” refers only to nasal symptoms, many patients also experience problems with other organ systems, including their ears, eyes, throat, and skin, as well as disruption of sleep. Therefore it is helpful to consider the entire spectrum of symptoms. If you have allergies, you may experience one or more of the following symptoms:

**Nose:** Watery nasal discharge, blocked nasal passages, sneezing, nasal itching, post-nasal drip, loss of taste, facial pressure or pain, or sinusitis.

**Ears:** Itchy ear canals, recurring ear canal infections, recurring middle ear infections, eustachian tube dysfunction, pressure in the ears, ear drainage, dizziness, Meniere’s disease, vertigo. (Fluid can accumulate in the middle ear in response to allergies, due to fluid production by the middle ear/mastoid and also due to inability for the fluid to drain out through eustachian tube into the throat. The fluid often has a mucous quality. This will cause a decrease in hearing and you may also develop dizziness/vertigo. If the ear is unable to drain normally, an environment is created which allows bacteria and viruses to grow and multiply, causing ear infections.)

**Eyes:** Itchy eyes, red eyes, feeling of grittiness in the eyes, swelling and blueness of the skin below the eyes (called allergic shiners).

**Throat :** Sore throat, throat infection, hoarse voice or itching of the throat.

**Sleep:** Mouth breathing, frequent awakening, daytime fatigue, difficulty performing daily tasks.

**Other:** Exacerbation of migraines, rashes, eczema.

The allergic reaction is characterized by activation of two types of inflammatory cells; mast cells and basophils. These cells produce inflammatory substances, including histamine, which causes fluid and swelling to build up in the nasal tissues (congestion), nasal itching, sneezing, and runny nose. Over several hours, these substances activate other inflammatory cells that can cause persistent symptoms. The allergic response is an overreaction to a harmless substance. When the allergic patient comes across something to which they are sensitive, the allergic cascade begins, often leading to misery.

You may suffer only seasonally (in the spring or fall) or you may suffer from allergies all year long. With the warm and dry climate in San Antonio, many residents suffer from allergies year-round. When an allergen is present year-round, the predominant nasal symptoms include post-nasal drip, persistent nasal congestion, and resulting poor-quality sleep. In this office, we see many patients who suffer ear-related symptoms (including ear itching, ear pressure, ear infections, Meniere’s disease, and associated dizziness) and/or migraines. San Antonio is

regularly rated as one of the top ten (10) allergy cities in the United States, so many individuals in San Antonio and the surrounding area are significantly affected by allergies.

Although medications may reduce or prevent symptoms, only a regimen of *immunotherapy* (e.g. allergy shots) can prevent long term relief. Allergy shots have been used by the medical profession since 1911. The time-tested therapy decreases a patient's sensitivity by introducing increasingly larger doses of the substances to which the patient is allergic. When indicated by positive allergy testing, the treatment is a method for increasing the allergic patient's natural resistance to the things that are triggering the allergic reactions.

If you have allergies, you may be wondering if allergy shots are the best treatment for you. After all, taking regular shots isn't anyone's idea of fun, but the possibility of being free from your allergy symptoms may be worth it. If you require multiple medications to control your symptoms, allergy shots may actually be a cost saving option when considering the pharmacy co-pays, the out-of-pocket expense of over-the-counter allergy medications, and perhaps missed work time. The goal of allergy shots is to gain this tolerance to harmless substances which are mistaken by your immune system for "dangerous invaders".

Allergy shots are usually very effective in the treatment of allergic rhinitis. Most patients will improve with the therapy. Immunotherapy "turns off" the allergic reaction to plant pollens, molds, dust mites, and animal dander, among others, over time. This is accomplished by the regular administration of the material to which you are allergic. The allergy extract prescription is specifically designed for you, based on an evaluation of your symptoms, medical history, physical findings, and allergy testing.

Here at the Ear Institute of Texas, many of our patients have reported relief from their allergy symptoms after undergoing immunotherapy treatments. This includes not only nasal allergy symptoms, but also relief from allergy symptoms related to the ear (such as Meniere's disease) and migraine disease. If you test positive for multiple allergens, Dr. Jackson typically recommends that you begin immunotherapy treatments.

If you have questions in regard to immunotherapy treatment, one of our friendly staff will be happy to assist you. We trust you will want to continue on your road to recovery by starting with immunotherapy as soon as possible. Thank you for being our valued patient.

**Don't let this be you any longer!**

