Referring Allergist Agreement

Your patient is requesting that the Washington Student Health Center (UMWSHC) administer allergy extracts Consistent with our policies we ask that you, as the prescribing and referring physician, complete and return the Allergy Immunotherapy Administration this referral agreement.	s provided by your office. g Allergy/Immunology
I agree that:	
 I will provide allergen immunotherapy extract in adequately labeled via UMWSHC. The allergen immunotherapy extracts will be prepared by individuals exhandling allergenic products. I will provide maintenance concentrate that contains therapeutically eff formulated but consistent with current guidelines as outlined within the Allergy, Asthma, and Immunology Practice Parameters and Guidelines If necessary, I will provide adequately labeled vials of serial dilutions of should the patient still be undergoing the build-up phase of immunother I will provide detailed directions regarding dosage schedule for build-up and instructions on adjustments that might be necessary under the follo The use of new vials. If the constituents of the allergen immunotherapy extract have chant the lot, manufacturer, vaccine type (e.g., aqueous, glycerinated, star allergens and their respective concentrations in the extract. During seasonal exposure to allergens that are in the patient's allergen patient is very sensitive. If the patient has missed injections. When reactions occur to the allergen immunotherapy extract. I will continue to be responsible for the management of this patient's in modification of doses during therapy. I will reevaluate this patient at least every 6 to 12 months. I will be available by phone to the nurses and providers at UWMSHC sarise with this patient's immunotherapy. 	ective dosing individually American Academy of of the maintenance concentrate rapy. p phase and/or maintenance, wing circumstances: nged; these include changes in indardized), and component gen vaccine, to which the
• I understand that the initial injection out of <i>any</i> new vial (including build done at UMWSHC and will be done at an allergist's office.	idup) and all vial tests are not

Signature

Updated: Apr 08, 2020

Printed name

Date