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April 10, 2026

Office of the National Coordinator for Health Information Technology
(ONC)

U.S. Department of Health and Human Services
330 C Street SW
Washington, DC 20201

**Re: AAAAAI Support of Proposed USCDI Data Element: Allergy
Intolerance Criticality**

Dear Colleagues,

The American Academy of Allergy, Asthma & Immunology (AAAAI) submits this letter in strong support of the proposed addition of **Allergy Intolerance Criticality** as a data element within the United States Core Data for Interoperability (USCDI). The AAAAAI represents thousands of allergist-immunologists dedicated to improving the diagnosis, treatment and documentation of allergic and immunologic diseases. We believe this proposed change directly advances patient safety, enables better clinical decisions, and lays critical groundwork for the broader modernization of allergy documentation in electronic health records (EHRs).

Why the AAAAAI Supports This Change

The current allergy module in most EHRs fails to adequately communicate the clinical criticality of documented reactions. At present, a patient with a history of anaphylaxis to penicillin and a patient with a mild gastrointestinal intolerance to the same drug often carry identical allergy labels, an ambiguity that impairs clinical decision-making and contributes to unnecessary drug avoidance. The proposed **Allergy Intolerance Criticality** data element, offering standardized coded values of Low Criticality, High Criticality, and Unable to Assess, addresses this gap directly. Its addition is crucial to improve patient safety and will result in better outcomes by not avoiding drugs with low risk in favor of treating a disease with high risk of morbidity. By enabling clinicians to distinguish potentially life-threatening reactions from less severe ones, this element supports more actionable, proportionate clinical responses across care settings.

However, although the Standards Bulletin announcing version 7 of USCDI the Criticality data element is included, it does not have a bold S next to it. This means that it is suggested as "should support". The bold S means Must Support as part of the US Core Profiles. **We strongly recommend that this important data element be designated as Must Support.**

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Critically, standardizing this data element through USCDI will promote consistent implementation across EHR vendors, reduce reliance on free-text entries, and enable clinical decision support tools to better prioritize allergy alerts. This has the potential to meaningfully reduce alert fatigue—a well-documented problem that leads clinicians to override warnings that may, in some cases, represent true safety hazards.

Context: AAAAI's Ongoing Work on EHR Allergy Documentation

The AAAAI has been a leading voice in advocating for the modernization of allergy documentation within electronic health records. We are eager to collaborate with the ONC, EHR vendors, and other healthcare stakeholders to implement standardized frameworks that move beyond the limitations of current systems, such as overreliance on free-text and inconsistent terminology. While the addition of **Allergy Intolerance Criticality** is a meaningful and necessary first step, we remain enthusiastic about sharing our broader vision for more precise, actionable documentation, including improved hierarchical categorization and enhanced clinical decision support, to ensure patient safety and reduce clinician alert fatigue across all care settings.

The USCDI as Foundation for Future Progress

The AAAAI views the USCDI standards as foundational infrastructure upon which future progress in allergy documentation must be built. Standardized, coded data elements, exchanged interoperably across systems, are a prerequisite for the more advanced reforms our field envisions: improved allergy delabeling workflows, natural language processing–assisted reconciliation, genetic and pharmacogenomic risk integration, and cross-institutional alert exchange that does not depend solely on patient self-report. Without alignment at the USCDI level, locally implemented improvements will remain siloed and unable to achieve population-level safety gains.

The AAAAI is committed to serving as a resource to ONC, EHR vendors, and other stakeholders as this work continues. We encourage ONC to finalize the inclusion of Allergy Intolerance Criticality in the USCDI, but change its designation to Must Support.

Respectfully submitted,

A handwritten signature in black ink, reading "Carla M. Davis MD". The signature is fluid and cursive, with the "MD" written in a slightly larger, more distinct script at the end.

Carla M. Davis, MD, FAAAAI
President, American Academy of Allergy, Asthma & Immunology