Re: Patient Allergen Immunotherapy

Dear Supervising Physician:

We understand that (Patient) will receive his allergen immunotherapy injections in your office/clinic. Allergen Immunotherapy has demonstrated in controlled studies to be effective in the treatment of allergic rhinitis, asthma and hymenoptera hypersensitivity. But the treatment is not without risk. We have explained the risk and benefits of immunotherapy to (Patient) prior to obtaining (his/her) consent to begin this treatment. (Patient) has requested that immunotherapy treatment be administered in your office because of (reason e.g. convenience of location). Serious adverse reactions to immunotherapy are rare but do occur. There are some safety measures you should implement to ensure this treatment is administered under the safest circumstances. The following are some of the identified risk factors for adverse reactions to allergen immunotherapy.

Risk Factors for immunotherapy

Some of the primary common risk factors in administering immunotherapy treatments are as follows:

1. Error in dosage
2. Presence of symptomatic asthma
3. High degree of hypersensitivity
4. Use of beta-blockers
5. Injections from new vials
6. Injections made during periods of exacerbation of symptoms

Minimizing Risk with Immunotherapy

The following is an excerpt of a Position Statement on the administration of immunotherapy outside of the prescribing allergist’s office. A copy of the full Position Statement is enclosed herewith for your information. Please review this and the accompanying documentation before administering immunotherapy to (Patient):

“It has been recommended that allergen immunotherapy should be given in settings where emergency resuscitative equipment and trained personnel are immediately available to treat systemic reactions under the supervision of a physician or licensed physician extender. The trained personnel should be familiar with the following procedures:

- Adjustment of dose of allergen immunotherapy extract to minimize reactions.
- Recognition and treatment of local and systemic reactions to immunotherapy injections.
- Basic cardiopulmonary resuscitation.
• Ongoing patient education in recognition and treatment of local and systemic reactions that occur outside the physician’s office.”

**Recommended emergency resuscitative equipment**

Adequate equipment and medications should be immediately available to treat anaphylaxis, should it occur. The following are suggested equipment and medications for the management of immunotherapy systemic reactions. Modifications of this suggested list may be based on anticipated emergency medical services’ response time and physician’s airway management skills:

- stethoscope and sphygmomanometer;
- tourniquet, syringes, hypodermic needles, and intravenous catheters (e.g., 14-18 gauge);
- aqueous epinephrine HCL 1:1000 wt/vol;
- equipment to administer oxygen by mask.
- intravenous fluid set-up;
- antihistamine for injection (second-line agents for anaphylaxis, but H1 and H2 antihistamines work better together than either one alone);
- corticosteroids for IM or intravenous injection; (second-line agents for anaphylaxis)
- equipment to maintain an airway appropriate for the supervising physician’s expertise and skill.
- glucagon kit available for patients on β-blockers

Please execute and date a duplicate copy of this letter and return it to our office to confirm that your office will be administering (Patient’s) immunotherapy under your supervision.

We appreciate your assistance and cooperation in this matter and look forward to receiving the request confirmation from you in the near future.

Sincerely,

**[PRESCRIBING PHYSICIAN SIGNATURE]**

I have reviewed the allergen immunotherapy information and instructions set forth herein and enclosed herewith and I hereby give permission for (Patient) to receive (his/her) allergy immunotherapy injections in my office under my supervision. I further agree to administer same in accordance with the information and instructions set forth herein or enclosed herewith.

Name and Address of physician:

________________________________________

________________________________________

________________________________________

Updated 4/5/2011


Modified with permission of Dr. Richard Lockey, M.D.