

Indiana University Health Center Policy and Procedure for Allergy Immunotherapy

Purpose:

Allergy immunotherapy is used to alter the immunologic response in allergic patients. The extracts used are individually prepared serums supplied by allergists not privileged at the Indiana University Health Center (IUHC). It is the intent of IUHC to provide to patients the service of administering these extracts under the orders provided by outside allergists.

Policy:

- Patients requesting administration of immunotherapy extracts will complete the **Student Request to Receive Allergy Immunotherapy (PDF)** form. This is to be given to the nurse at the first appointment. www.healthcenter.indiana.edu Click on **Download Forms**
- Patient's allergist will complete the following forms and fax to IUHC:
 - **Referring Allergist Agreement (PDF)**
 - **Allergist Order Sheet (PDF)**
 - **Allergy Patient Dosage Recording Sheet (PDF)** www.healthcenter.indiana.edu Click on **Download Forms**

Once these forms are received, they will be reviewed by both Immunization nurses. Allergist's office will be contacted for any order clarifications.

- Allergist will provide allergy serum in vials that are adequately labeled with patient name, antigen(s) name, dilution and expiration date. Serum can be mailed to IUHC or delivered by patient.
- Administration of allergy serum will be performed by a licensed IUHC registered nurse.
- Allergy immunotherapy will not be administered unless an IUHC attending physician is present and readily accessible in the building.
- IUHC will provide the service of storing allergy serum for patients between injections. IUHC is not liable for the compromise in the integrity of allergy serum due to handling before IUHC receives the medication or for loss or compromise of integrity due to power outage, storage equipment failure, or catastrophic event. See **Procedures** for storage criteria.
- Consents and referral agreements expire at the end of each academic year (August 15th).

Procedures:

▪ Administration of Allergy Serum:

- Nurse must verify patient's identity and the correct allergy serum.
- Nurse must verify the patient's health status:
 1. Any reaction to last allergy injection?
 2. Are you ill today or in the last week?
 3. Have you had increased allergy symptoms?
 4. Are you taking any new medications?
 5. Are you pregnant?
- No allergy injections will be given if patient is ill, febrile, has symptomatic asthma, or has sunburn or irritation at the injection site. **No allergy injection will be given if patient does not have an epi pen with them.** Allergy nurse may give prescription for an Epinephrine Auto Injector device if patient's allergist has not done so. RX: Epinephrine Injection USP 2-pak, Epinephrine Auto-Injectors 0.3mg.
- Patients taking beta-blockers will not receive allergy injections.
- Expiration date on serum will be checked prior to giving injection. Expired serum will be discarded and documented on **Allergy Patient Dosage Recording Sheet.**
- Injections are given subcutaneously using a 1ml syringe with a 27 gauge half inch needle. Once serum is drawn into syringe, a new needle will be applied for injection.
- Injections will be given in the posterior portion of the middle third of the upper arm at the junction of the deltoid and triceps muscles.
- The syringe will be aspirated to check for blood return before injecting. If blood is present, the solution will not be injected and the syringe removed and discarded in an appropriate container.
- If the allergist orders a Benadryl or Epinephrine Wash be performed as part of the allergy injection, the Benadryl and Epinephrine vials will be treated as single dose vials and discarded after each use.
- The patient is required to wait for 30 minutes after receiving an allergy injection.

▪ Documentation:

All documentation for allergy injections will be written on the Patient Dosage Sheet and kept with the patient's allergy serum. Current copies of the **Allergy Patient Dosage Recording Sheet**

will be sent with all Allergist correspondence. A copy of completed **Allergy Patient Dosage Recording Sheets** will be sent to IUHC medical records department.

▪ **Storage of Allergy Extract:**

- Allergy extract and the completed **Allergist Order Sheet** and **Allergy Patient Dosage Recording Sheet** are stored in containers clearly labeled with patient's name and UID number. Patients with similar names will have their containers flagged with a yellow marker to caution nurse of the need for extra care.
- The extract will be stored in a monitored refrigerator and kept between 34.4 degrees F and 42.8 degrees F.

▪ **Protocol for Reactions:**

- **Local reactions** If erythema and or induration at the site of injection is noted, allergist's orders will be followed as written on **Allergist Order Sheet**.
 1. Ice may be applied to injection site
 2. May apply topical hydrocortisone to injection site.
 3. Observe patient for 15-20 extra minutes and be alert to progression to systemic symptoms.
 4. Instruct patient in systemic symptom recognition and need for prompt treatment.
- **Systemic Reaction** This encompasses all other reactions such as, but not limited to rash, dyspnea, hives, swelling or itching in throat.

IF PATIENT IS IN NO ACUTE DISTRESS:

1. Draw up and give 0.5cc epinephrine IM in vastus lateralis
2. Activate internal alarm
3. Call Acute Care and request Acute Care provider STAT. Acute Care RN will notify Acute Care provider to go to Immunization Dept. immediately.

IF PATIENT IS IN RESPIRATORY DISTRESS or rapidly progressing symptoms:

1. Draw up and give 0.5cc epinephrine IM in vastus lateralis
2. Activate internal alarm
3. Call 911 for EMS
4. Call Code 99 for cardiac or respiratory arrest and be ready to begin basic life support CPR.
5. Maintain airway, monitor BP and administer oxygen.
6. Draw up epinephrine 0.5cc and give IM in vastus lateralis every 3-4 minutes as needed.
7. Give report to EMS prior to transport.