

Lafene Health Center  
Allergy Clinic  
Kansas State University

1105 Sunset Avenue  
Manhattan, KS 66502  
Phone: 785-532-6544  
Fax: 785-532-3425

### **ALLERGY IMMUNOTHERAPY FACT SHEET**

**APPOINTMENT SCHEDULING:** Allergy immunotherapy will **ONLY** be administered **AFTER** the initial dose or doses have been given **by the patient's allergist**. Allergy injections will be given by appointment only. You may set up a standing appointment time to come during the semester to coincide with your class schedule. To make an appointment, you may go on line and **login to myLafene with your eID and password**. You can also call Lafene Health Center at **532-6544** to schedule an appointment. If you miss your appointment, call and reschedule. It is your responsibility to cancel any appointments you know you cannot make. You will be charged for all failed appointments.

**It is mandatory for all new allergy patients to have an initial consult with a Lafene Health Center physician after being admitted to the allergy clinic. Failure to comply could delay allergy injections until this consult is completed.**

**EPINEPHRINE SELF-INJECTOR:** If your doctor has prescribed an epinephrine self-injector, you are required to bring it with you to your appointment or you will not receive your allergy injection.

**BETA BLOCKER INTERACTIONS:** Beta Blockers **will not be used** with allergy immunotherapy. They can be a potential problem because the medications counteract the effects of adrenaline (epinephrine), which is used to treat the severe generalized reactions to the allergy immunotherapy injection. **ADVISE YOUR PHYSICIAN IF YOU TAKE BETA BLOCKERS** (e.g. **Blocadren, Brevibloc, Corgard, Inderal, Normozide, Sectral, Tenoretic, Tenormin, Visken, Lopressor, Inderide, Inderal-LA**). A complete list is provided upon admission.

**PEAK FLOW:** Peak Expiratory Flow Rate is measured before and after an injection to assess for a reaction.

**WAIT REQUIREMENTS:** After each injection, there is a minimum 30 minute wait required. Clients may go to see a healthcare provider if they have a scheduled appointment, but must be accompanied by nursing personnel to the clinic area. Going to other areas of the clinic or leaving the building is prohibited. This is a safety procedure so we may note any reactions and render needed treatment.

**COST:** Health fees must be paid before using the Allergy Clinic. Fall/Spring enrolled student patients receiving allergy injection during the summer, shall not be required to pay the "summer health fee". Those individuals not paying the summer fee are not eligible to receive any other service other than allergy injections. Scheduled charges for the injections shall apply.

**FROM YOUR ALLERGIST: **Before injections are begun, we need the following information in writing:****

- Detailed dosage and schedule.
- Date of mixture or expiration date.
- List of allergens.
- Instructions regarding missed injections or for times when off prescribed schedule.

These requirements may be mailed or faxed to: YOUR NAME, Lafene Health Center, Allergy Clinic, 1105 Sunset Ave, Manhattan, KS 66502. This information will be placed in your allergy chart kept in the Allergy Clinic.

**STORAGE OF EXTRACTS:** Extracts are to be stored in the refrigerator in the Allergy Clinic, but at your own risk. We cannot be responsible for misplaced or broken extracts. Only current extracts may be stored at Lafene. Any extracts not in use for more than 6 months or those that have expired will be discarded by Lafene staff.

**ORDERING OF EXTRACTS:** Ordering will be completed by nursing staff with your assistance as necessary.

**PREGNANT PATIENTS:** If a woman becomes pregnant while receiving allergy immunotherapy, she will have to return to her allergist for her injections during her pregnancy.

**RESPONSIBILITY:** Students are responsible for keeping on schedule, checking arms regularly after injections, and reporting any problem before the next injection.

**FAILURE TO COMPLY MAY NEGATE ANY FUTURE USE OF THE ALLERGY CLINIC**