

QUESTIONS to EVALUATE YOUR PENICILLIN or PENICILLIN-LIKE ALLERGY

You have stated that you have a penicillin or penicillin-like allergy. It is now recommended by the American Academy of Allergy, Asthma and Immunology that all adults with a penicillin or penicillin-like allergy have an allergy evaluation proactively. More than 95% of patients labeled as penicillin or penicillin-like allergic are not actually allergic and 80% of people lose their allergy after 10 years.

This questionnaire will help us determine if you can safely receive a penicillin or penicillin-like antibiotic.

- 1. There are 4 sections to determine your penicillin allergy type.
- 2. Please answer each question by choosing YES or NO
- 3. Name of allergic antibiotic ______ or fill in "Unknown"

THIS WILL DETERMINE IF YOU HAVE A <u>RARE SEVERE DELAYED</u> ALLERGY.

Step 1

2.

Do you have a history of ANY of the following reactions after taking an antibiotic? THE REACTION MAY HAVE OCCURRED ALMOST IMMEDIATELY OR UP TO SEVERAL WEEKS after taking the antibiotic. Please check "Yes" or "No" (or cirle Yes or No if printed out). (Titles below are for health care provider use)

1. <u>SJS/TEN</u>

•	Rash devoping into blisters all over your body	YES	NO
•	Mouth sores	YES	NO
•	Redness of the eyes	YES	NO
DRESS			
•	Rash all over your body followed by peeling of the skin	YES	NO
•	Rash with mouth sores, swollen glands, liver or kidney problems	YES	NO

3.	<u>AGEP</u>

4.

5.

6.

• Rapidly spreading, pin-sized pus-filled, blister-like sores all over your body	YES	NO
SSLR		
• Rash and joint pains <u>VASCULITIS</u>	YES	NO
• Purple rash with kidney or lung damage	YES	NO
ORGAN SPECIFIC		
Damage to liver, kidneys or blood count	YES	NO

If "YES" to any question(s),

Patient: You are SEVERELY ALLERGIC to penicillin and any of the penicillin-like antibiotics.

You should not take any penicillin or penicillin-like antibiotics until you are evaluated by your healthcare provider.

****YOU DO NOT HAVE TO ANSWER ANY OTHER QUESTIONS.****

Provider:Do not prescribe a penicillin or cephalosporinRefer to an allergist

If "NO" go to Step 2.

THIS WILL DETERMINE IF YOU HAVE A <u>SEVERE</u> <u>IMMEDIATE ALLERGY</u>.



Do you have a history of any of the following reactions occurring less than 6 hours after taking an antibiotic?

•	Sudden onset of shortness of breath, wheezing, cough or high-pitched whistling sound while taking a deep breath	YES	NO
•	Passed out	YES	NO
•	Total body rash with welts that itch	YES	NO
•	Swollen lips, tongue or throat tightness	YES	NO
•	Abdominal pain or vomiting	YES	NO

If "YES" to any question(s),

Patient: You are SEVERELY ALLERGIC to penicillin and any of the penicillin-like antibiotics.

You should not take any penicillin or penicillin-like antibiotics until you are evaluated by your healthcare provider.

YOU DO NOT HAVE TO ANSWER ANY OTHER QUESTIONS.

Provider:Do not prescribe a penicillin or cephalosporinRefer to an allergist

If "NO" go to Step 3.

THIS WILL DETERMINE IF YOU ARE <u>NOT ALLERGIC</u> BUT HAD A COMMON SIDE AFFECT FROM THE ANTIBIOTIC.

Step 3

Have you had any of the following NON ALLERGIC reactions to an antibiotic?

•	Headache	YES	NO
•	Diarrhea, nausea, vomiting or abdominal pain	YES	NO
•	Flat rash without welts	YES	NO
•	Itching without a rash	YES	NO
•	Do you have a family history of penicillin allergy	YES	NO
•	I don't know or forgot	YES	NO

If "YES" to any question(s),

Patient: You are <u>NOT ALLERGIC</u> to penicillin and any of the penicillin-like antibiotics.

YOU DO NOT HAVE TO ANSWER ANY OTHER QUESTIONS.

Provider: • Patient can receive a penicillin or cephalosporin

If "NO" go to Step 4.

THIS WILL DETERMINE IF YOU HAVE A <u>DELAYED</u> (<u>NON-SEVERE</u>) <u>ALLERGY</u> AND ARE AT A <u>LOW RISK</u> FOR TAKING THE ANTIBIOTIC.

Step 4

Since your antibiotic reaction, have you taken any of the following antibiotics without any reaction?

Ampicillin	YES	NO
Amoxicillin	YES	NO
Amoxicillin/Clavulanate (Augmentin)	YES	NO
Cephalexin (Keflex)	YES	NO
Cefadroxil (Duricef)	YES	NO
Cefuroxime (Ceftin)	YES	NO
Cefaclor (Ceclor)	YES	NO
Cefixime (Suprax)	YES	NO
Ceftriaxone (Rocephin)	YES	NO
Penicillin - oral, injection	YES	NO
Cefdinir (Omnicef)	YES	NO

If "YES" to any question(s),

Patient: You are <u>NOT ALLERGIC</u> to penicillin and any of the penicillin-like antibiotics.

YOU DO NOT HAVE TO ANSWER ANY OTHER QUESTIONS.

Provider: • Patient can receive a penicillin or cephalosporin

If "NO" or Unknown go to Step 5.



Has the time since the reaction been greater than 5 years or unknown?

YES

If **"YES"**,

Patient: You **most likely do not have** a penicillin or penicillin-like allergy or have outgrown it. You need to check with your healthcare provider and should not take this type of antibiotic until you are evaluated.

YOU DO NOT HAVE TO ANSWER ANY OTHER QUESTIONS.

Provider: Administer an **amoxacillin** challenge.

If "NO" or Unknown go to Step 6.

Step 6

Did the reaction occur greater than 6 hours after you received the antibiotic? YES NO

If **"YES"**,

Patient: You **most likely do not have** a penicillin or penicillin-like allergy or have outgrown it. You need to check with your healthcare provider and should not take this type of antibiotic until you are evaluated.

Provider: Administer an **amoxacillin** challenge.

If **"NO"**,

Patient: You are SEVERELY ALLERGIC to penicillin and any of the penicillin-like antibiotics.

You should not take any penicillin or penicillin-like antibiotics until you are evaluated by your healthcare provider.

Provider: • Do not prescribe a penicillin or cephalosporin

• Refer to an allergist