

Injections Administered at an Outside medical facility

Park Cities Allergy and Asthma policy requires that all allergy injections must be administered in a medical facility where a physician is present in case of an allergic reaction.

The medical facility you wish to transfer to must sign and complete The Immunotherapy Treatment Acknowledgement Letter. Once we have received the signed consent we will expedite transferring your serum. If you need assistance finding a Board Certified Allergist you may visit www.aaaai.org.

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, agree and understand the following:

* I understand serum must be paid in full prior to transferring.
* I agree to a $35.00 fee to have the serum overnighted.
* I understand I will continue to follow up every 4-6 months with PCAAA .
* I understand by transferring my allergy serum to another medical facility, I release PCAAA of all medical liability.
* I understand PCAAA require a 30 minute wait after each injection.
* I understand PCAAA requires me to have an Epi-pen or Auvi-Q on the day of my injection.
* I understand my responsibility to notify PCAAA and the medical facility of any new medications or if I become pregnant.
* I agree to abide by the medical directions provided to me by Park Cities Allergy and Asthma.
* I will not attempt to administer vaccines to myself.

Patient signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

Witness: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_     Date: \_\_\_\_\_\_\_\_\_\_