## ALLERGY, IMMUNOLOGY & ASTHMA MEDICAL GROUP E-SCRIPT\_\_\_\_ Office use only DATE\_\_\_\_\_DOCTOR\_\_\_\_\_ACCT#\_\_\_\_M\_\_F\_\_\_

	PATIE	NT FINAN	CIAL INFO	<b>PRMATION</b>		
PATIENT'S NAME						encentario entere en encentrario.
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MAILING ADDRESS						
	Number and Street		Cit	ty, State, Zip Code	e + 4 digit posta	l code
HOME PHONE		CELL	***************************************	Emai	1	
SOCIAL SECURITY #		EMPLOYE	ER			
BUSINESS ADDRESS					PHONE#	
	Number and Street		p Code + 4 digit			
REFFERED BY:		FAMI	LY DOCTOR:_			
Any other family members	patients?					
Patient, circle appropriate o	ne: Single	Married	Sepa	rated	Divorced	Widowed
	S	SPOUSE OR RI	ESPONSIBLE I	PARTY		
NAME				_RELATIONSHIF		
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		INSURANCI	E INFORMAT	ION		
PRIMARY INS			INSUF	RED'S NAME		
SECONDARY INS			INSUI	RED'S NAME		······································
We are required to maintain Name	the privacy of your l	nealth informatio	n (HIPAA). Plea	ase advise who we	e may disclose y	our information t
EMERGENCY CONTACT				,		<del> </del>
Preferred Pharmacy			Loca	ation		····

I am responsible for the balance of my account for any professional services rendered.

Signature \_\_\_\_\_\_Date\_\_\_\_\_

## Allery, Immunology & Asthma Medical Group, Inc.

them for the period of time indicated. Picase be aware than many over the counter medications have antihistamine in them and would interfere with skin The medications listed below must be stopped prior to skin testing. Please review this list and locate any medications you are currently taking and stop

If you have any questions about a medication or if you feel you cannot safely stop the medication please call the office at 951-5353

## If you cannot withhold your medication prior to your visit DO NOT RE-SCHEDULE YOUR APPOINTMENT

				All Cold and Nighthine meds	
		Risperdal	Cyproheptadine	Unisom	
		Resperidone	Coricidin	Tylenol Cold & Sinus	,
		Rescon	Contac -	Tylenol PM	
		Remeron	Commen	Tylenol Allergy	
		Protriptyline	Cogentin	Triaminic	OFFICER A, LASTACAFT
	Xyzal ·	Polyhist	Clompramine	Trinalin	
	Lyrtec D	Fediatan	Clemastine	Tavisi, Lavist B	Westat Zadifor Repreve
	Zyrtec	Pedicare	Clarinez D	Sudafed Allergy	Napheon A, Vasocon A,
	Zonoloa	Pamelor	Clariner	Sempres, Sempres D	Patanol, Pataday, Optivar,
	Vivactii	Myquil	Claritin	Rynsian.	testing
	Vicks	Nortriptyline	Cetirizine	Promethazine	tive Brops stop 72 hrs prior to
	Trimipramine	Morpramin	Carbinoxamine	Polynistine, Polyhistine D	
	Triavil	Marezine	Biohist	Phenergan	THE THEY OF THE PRINT SEE ASSET
	Folianu	Ludiomil	Benziropin	Periscin	المراجعة الم
•	Therafin	Loratadine	Benigl	Zad	Astilma Weds
	Temarii	Lodrane	BC Cold	Pannaz	
	Tavist	Limbitreit	Aventy	Naldecon	at least 48 hours prior to your visit
	Landur	Lmipramine	Atrobist	Meclazine	Stop Astelin, Patanase or Astepro
•	Tacary	Fexofenadine	Ataras	Excedin PM	,
	Surmontil	Extendiyi	Asendiu	Dramamine	Astelin, Patanase and Astepro
	Sommex	Hirafou	Anadranil	Ресолатие	EXCEPT:
	Singlet	Elavii	Amin'iptyline	Chloritimeton (chlorpheneramine)	Nasal sprays are OK to use
	Sinequan	Dytan	Allers	Benadryl (diphenhydramine)	Nasal Sprays
	Seroquel ::	Duravent	Allertan	Bromfed	
	Ryneze	Duraian	Allerhist	Bonine	
	Ryna	Durahist	Allegra D	Autivert	Zantac (rautidine)
	Rutuss	Drixoral	Allegra	Advii PM	Pepcid (famotadine)
	Rondec	Dramamine	Alavert	Actifed .	Tagamet (cimetidine)
	Allergy	Doxepin	An-Chem	antihistamines	Axid (nizatidine)
,	Cough, Cold &	Dimetapp	Advil Ailergy	meds or any med that contains	Antacids
	Robitussin	Desipramine	Adapin	Stop all Allergy, Cold, Cough or Sinus	
					•
	,	ದ್ದ	(D)	esting	esting
		days prior	Stop 7 (	Stop 72 hours prior	Stop 24 hours prior

## Allergy, Immunology & Asthma Medical Group, Inc. 4628 Georgetown Place Stockton, CA 95207 209 951-5353

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Bring ALL of the	this for medica	n and br tions you	ing it with you I are currently	to you takin;	ır first : g to yo	appoints ur first :	nent. Ippointmen
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Asthma		and the state of t					The state of the s
Other Symptoms	,		er med en de	· · · · · · · · · · · · · · · · · · ·	·		America americal grave de partir de la gravita de la constanta de la constanta de la constanta de la constanta
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Medication Name		Dosage	How often per da	ıy	Reason	you take t	his medication
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