

**PREPARING FOR YOUR ALLERGY TEST**

Please review the medication list below, it is important for proper test results that you discontinue the use of these medications for the time frame indicated.

**Please note:**

If you have a history of anaphylaxis (a life threatening allergic reaction) please **continue** the use of your medications even prior to your allergy test. If you are not sure of your history or cannot discontinue your medications please consult your physician to discuss.

* **Antihistamines** (discontinue 3 days prior to testing)

|  |  |  |  |
| --- | --- | --- | --- |
| Acitifed | Deconamine | Novahistine | Tagamet |
| Acid reflux med | Dimetapp | Nyquil | Trinalin |
| Allegra | Dramamine | Optimine | Tylenol pm |
| Excedrin | Periactin | Vistaril | Atarax |
| Extendryl | Phenergan | Zantec | Arohist |
| Ibuprofen | Polyhistine | Zyrtec | Benadryl |
| Bromfed | Isoclor | Proaramine | Kronofed |
| Ritalin | Chlorpheniramine | Loratadine | Tilain |
| Rondec | Clarinex | Midol | Rynatan |
| Marax | Claritin | Naldecon | Tavist |
| Codimal | Nolahist | Teldrin | comhist |

**Special attention:**Claritin & Claritin-D **DO NOT** take 7 days prior to your allergy test.Hismanal **DO NOT** take 6 weeks prior to your allergy test. Avoid any over the counter preparations for cold, sinus or allergy.

* **Inhalarers** (avoid for 6 hours prior to testing if possible) for Dulera avoid 24-48 hours.
* **Ophthalmic Beta Blockers for Glaucoma**

|  |  |  |
| --- | --- | --- |
| Betaxon | Betagan | Timoptic |
| Betoptic | cosopt |  |

* **DO NOT TAKE** for 3 days prior to your allergy test

|  |  |  |
| --- | --- | --- |
| Muscle relaxers  | Sedatives | Sleep aids |
| Nasal sprays | Large dose of vit C | tranquilizers |

**Important: Please consult with your prescribing physician before stopping any antidepressants**

* **Antidepressants and Tricyclic Antidepressants** If approved by your physician avoid 3 days prior to testing

|  |  |  |  |
| --- | --- | --- | --- |
| Adapin | Effexor | Remeron | Valium |
| Anafranil | Elavil | Serzone | Vistaril |
| Asendin | Etrafon | Sinequan | Vivactil |
| Atarax | Limbitrol | Surmonfil | wellbutrin |
| Ativan | Nardil | Tofranil | Xanax |
| Buspar | Pamelor | Trancopal | Zoloft |
| Celexa | Paxil | Tranexnel | Desyrel |
| Prozac | triavill |  |  |

If you are currently taking a beta blocker prescribed by your physician you will not be allowed to have the allergy skin test performed unless 1) the medication can be discontinued 2) substituted 3 days prior to testing or 3) approved by your physician. If not, a standard and routine blood exam for allergies an be performed instead.

* **Beta Blockers for Hypertension ( high blood pressure)**

|  |  |  |  |
| --- | --- | --- | --- |
| Sotalol | Timolol | Esmolol | Cartelol |
| Nadolol | Propanolol | Propanolol HCL | Betaxol LCL |
| Labetalol | Penbutolol | Metoprolol | Nadolol |
| Labetalol | Propranolol | Acebutolol | Sotalol |
| Atenolol | Timolol maleate | Metoprolol | Labetalol |
| Pindolol | Bisoprolol | Ziac | Tropol XL |

* **Special attention**

Notify the allergy department if you are given steroids in any form ( by mouth, by injection, into tendons joints , intravenously or by lotion or cream within 4 weeks prior to your test)