

Allergy History

Applicants who have had a history of taking medications should be requested to secure a statement from the doctor who treated him/her, setting forth the following information:

1. Type of allergy and symptoms.
2. Age of onset of the allergy attacks.
3. Severity and frequency of attacks.
4. Onset of treatment, medications taken, length of treatment.
5. Was asthma diagnosed?
6. Last date of evaluation for asthma.
7. Was a methacholine challenge test done? If not, why not?
8. State any type of allergy workup and date.
9. Climatic or geographic restrictions.

M. D. Signature

M. D. name printed or typed

Board certified? Y ___ N ___

Telephone Number _____

Revised 6/06