

University of Oklahoma
Goddard Health Center
620 Elm Avenue
Norman, Oklahoma 73019-3146
405-325-4611
Fax: 405-325-7542

New Allergy Patient Checklist

Patient Name: _____
(Last First M.I.)

Sooner ID: _____

Before beginning allergy injections at Goddard Health Center, you must complete the following checklist:

- ☐ Be an established patient with one of the providers at Goddard Health Center. If you have never seen provider at our clinic or it has been over three years since your last visit, please schedule an appointment with one of our providers prior to your first allergy injection.
- ☐ Have a current (not expired) Epi-Pen and/or obtain one before your first injection appointment. If you do not know how to use your Epi-Pen, we will be glad to show you.
- ☐ Have your allergy serum. Serum may be brought in by the patient or sent directly here by the allergist.
- ☐ Have current allergy record. Before your first injection, we must have a copy of your current allergy record. If it has been more than 30 days since your last injection, you must see your allergist. Please note: We do not perform “test” injections at our clinic; they must be done by your allergist.
- ☐ Read and Sign “**Allergy Clinic Guidelines and Patient Agreement**” before first injection appointment.
- ☐ Ensure “**Letter to Allergy Clinics**” is completed, signed by allergist, and returned to our clinic before first injection.

Patient Signature: _____ Date: _____

Nurse Signature: _____ Date: _____