Dear SSU Student:

The Sonoma State University Student Health Center (SSU SHC) may administer allergy immunotherapy injections to students who are established on an uncomplicated immunotherapy program and meet the criteria outlined in this letter.

Life threatening reactions can occur in any patient receiving allergy injections. Careful management and patient compliance can reduce but not eliminate the risk of serious complications. The SHC does not administer injections for insect allergy or in other circumstances that we determine would best be handled by an allergist. We will be happy to refer you to a local allergist in such instances. You are financially responsible to the provider for off campus medical care.

Only those who meet the following guidelines can be considered for administration of immunotherapy injections in the SSU SHC setting:

1. The student must remain under the continuing care of a Board Certified allergist who retains responsibility for the overall management of the student’s immunotherapy.

2. The student must be established on a stable uncomplicated immunotherapy program with no history of severe reactions to allergy injections.

3. The student must provide requested materials in a timely fashion and make/keep injection appointments at appropriate intervals.

4. The student must first be seen by a SHC primary care physician for evaluation and review of their allergy records and must provide the information indicated.

5. The student must provide the following records and information in advance of their SHC visits:
   a.) The name, phone number address, and medical license number of your Board certified allergist.
   b.) A referral letter from the allergist authorizing the SSU SHC to administer each specific allergen extract and indicating availability for telephone consultation with SHC staff regarding your care.
   c.) Instructions, including a schedule/guideline for future injection administration including the management of missed doses or reactions.
   d.) A copy or allergist’s summary of the student’s allergy record specifying the allergic problem (e.g. allergic rhinitis, asthma), history of reactions, etc.
   e) A copy of the student’s injection records for all allergy immunotherapy visits over at least the past year. The records must include the dose, concentration of the allergen, and response to each injection.

6. Allergen extracts:
   a) The SSU SHC takes no responsibility for the content, quality, potency, safety, or efficacy of the extract provided by your allergist, since the content is determined by the allergist and the quality/potency is determined by the company or allergist that prepares it and is influenced by anyone responsible for maintaining the conditions under which it is transported to the SHC.
b) Allergen extracts must be kept refrigerated or packaged with ice/coolant in an **insulated container** during transit and labeled *For Immediate Refrigeration*. Optimally, extracts packaged as above should be sent directly to the SSU SHC from the site of biological preparation. Shipped or mailed materials should be sent early in the week to ensure timely arrival on a weekday when the SHC is open.

c) Each bottle of extract must be labeled with the student’s name, contents, concentration, lot # if applicable, expiration date and the name of the allergist or company that prepared it.

d) The SHC **will not accept** extracts that have not been properly refrigerated during transport and are not properly labeled.

Complete the enclosed *Authorization to Release Medical Information* form, address the enclosed *Dear Dr.* letter to your allergist, fill in your name, and send both documents to your allergist as soon as possible. (These forms can also be downloaded from [www.sonomastateuniversity.edu](http://www.sonomastateuniversity.edu) under “forms” of the “Health” section of the website.) In addition, contact your allergist directly to ensure transfer of information and materials.

Prior to your visit, read the attached (or download from above site) *Student Allergy Injection Information and Responsibilities* and *Informed Consent to Receive Allergy Immunotherapy* sheets, ask questions, and be prepared to sign the SSU SHC Allergy Immunotherapy consent form at your initial SSU SHC MD visit.

Following the initial MD visit, students cleared for administration of their allergens at the SHC will be seen by an NP or RN unless the student has difficulties warranting a physician’s attention.

There is a $12 fee for one injection, $20 for two or more injections during the school year and a $12 *no show fee* for appointments that are not kept or cancelled at least 4 hours in advance. Fees are due at the time of service. They may be increased in the future and are somewhat higher during the summer.

Feel free to ask your SSU physician or the clinic RN any questions you have concerning the administration of allergy immunotherapy at the SSU Student Health Center. Keep this letter and other related SHC instructions for future reference.

Sincerely,

Sonoma State University Student Health Center

SHC/Allergy folder/StudentLetter8/07