PENICILLIN ALLERGY DELABELING

PATIENT NAME:

DATE:

Your physician has determined that you are not allergic to penicillin-based antibiotics based on at least one of the following criteria:

- ____ Your history was not concerning for either an immediate or delayed life-threatening reaction.
- ____ You have passed an oral challenge to the medication.

You can have penicillin-based antibiotics in the future if needed. A form will be sent to the provincial PharmaNet service to remove the allergy label from your record. Please contact your doctor if you have difficulty obtaining the medication (for example, if the Pharmacist is concerned that you still have the allergy). Please contact your doctor if you develop any delayed symptoms (such as rash) in the next week, and take photographs of any skin changes for review.

If your original reaction consisted of a rash, please be aware that there is a 5-10% chance that you may develop a similar rash (delayed onset, not with the first dose of the medication) with your next full course of the medication. Providing that you do not have any symptoms concerning for life-threatening delayed forms of allergy (skin peeling off, involvement of skin inside of your mouth or eyes, hot/swollen joints, new fever), the medication does not need to be avoided.

Please seek medical attention and then see your primary care provider for a re-referral if you develop the following symptoms with this (or any other) medications:

- Immediate symptoms (within 1-2 hours of <u>first</u> dose): hives, swelling, problems breathing, vomiting, lethargy/fainting
- Delayed symptoms: peeling of the skin, changes of the skin inside your mouth or eyes, hot/swollen joints, new fevers (that start after the medication began)