

Allergy Practice Name

Address

Phone Number

PENICILLIN SKIN TEST RECORDING FORM

Date: _____

Patient Name: _____

Date of birth: __/__/__

Patient History of PCN or other beta lactam allergy:

Last use of antihistamine (or other med affecting response to histamine): Medication: _____ was taken ____ days ago

Skin Test Instructions:

- a) Obtain patient consent and record vitals
- b) In quick sequence, apply prick skin tests with penicillin reagents plus positive and negative controls; read 15 minutes after placement
- c) If prick skin test is negative or equivocal, apply ID test, (0.02 to 0.03 mL) to raise a 2-3 mm bleb along with saline and histamine control; read 15 minutes after placement

VITALS: BP:

Pulse:

Resp:

LOT #	PRODUCT	PRICK		ID#1		Results (Pos/Neg/E quiv)
		Wheal	Flare	Wheal	Flare	
	PrePen® [PPL] (undiluted) 6 x 10 ⁻⁵ M					
	Penicillin G (10,000 U/ml)					
	Ampicillin 20 mg/mL					
	Diluent Control					
	Histamine Control **					

** Percutaneous Histamine Control= 10 mg/ml histamine dihydrochloride (Histamine base 6 mg/ml)
Intradermal Histamine Control= 0.275 mg/ml histamine phosphate (Histamine base 0.1 mg/ml)

Criteria for positive prick skin test: ≥ 3 mm wheal greater than diluent with erythema (flare)

Criteria for positive intradermal skin test: ≥ 3 mm wheal greater than diluent and with erythema (flare)

Note: Penicillin G and Ampicillin are both IV preparations

If skin test is negative, proceed with oral challenge to Amoxicillin

Oral Challenge Instructions:

- a) Give 1/10 OR 1/4 of therapeutic dose of amoxicillin PO and monitor for signs and symptoms of a reaction for 30 minutes
- b) Give 9/10 OR ¾ of therapeutic dose of amoxicillin PO and monitor for signs and symptoms of a reaction for 60 minutes (30 minutes)

Note: For extremely severe reactions, consider 1/100, 1/10, and then full strength

Time	Vitals	Dose of Amoxicillin	Symptoms
	BP: Pulse: Resp:	_____ mg amoxicillin PO	
	BP: Pulse: Resp:	_____ mg amoxicillin PO	

Reaction YES/NO If yes, describe: _____

- Patient was negative on skin testing and oral challenge to PCN and may take PCN/Amoxicillin in the future
- Patient is allergic to PCN based upon skin testing or oral challenge and should avoid all types of PCN

From the ACAAI 2015 Drug Allergy and Anaphylaxis Committee