

Juan L. Sotomayor, MD, PC  
**ALLERGY & ASTHMA**  
Diagnostic Office

5229 Witz Drive · North Syracuse, New York 13212 · (315) 701-9500 · FAX (315) 701-9555  
www.allergyaway.com

Juan Sotomayor, MD · Jill Agne, FNP · Summer Goetz, FNP · Katie Klee, FNP · Anna Salvagno, FNP

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## Testing Appointment Policy

As a patient of the Allergy & Asthma Diagnostic Office scheduling a testing appointment, I understand, acknowledge, and agree to the following (*Please initial each line and sign below*):

\_\_\_\_\_ I understand that courtesy appointment reminders for testing visits are sent approximately two weeks prior to the appointment through our TalkSoft/RevSpring system via phone call, email, and/or text message. If my appointment is scheduled less than two weeks in advance, I may not receive a reminder. I understand that it is ultimately my responsibility to know my appointment date and time.

\_\_\_\_\_ I understand that if I miss my appointment (“no-show”) or do not follow the medication-stopping guidelines outlined below (resulting in the need to reschedule), a \$75.00 fee not covered by insurance will be added to my account. This fee is my responsibility. Unpaid balances, including those for patients with Fidelis, may be subject to collection efforts. Your allergy testing medication is specially prepared just for you and cannot be used for anyone else. When an appointment is missed, it unfortunately results in wasted medication and added costs.

\_\_\_\_\_ I understand that my testing appointment is conducted with a nurse and that results will not be reviewed on the day of testing. A separate follow-up appointment with a provider is required to discuss results, and it is my responsibility to ensure this appointment is scheduled.

### Important Medication Instructions

Some medications may need to be stopped prior to testing. There are certain medications, like antihistamines, that will affect the validity of allergy testing. Please review all cold/ allergy and over-the-counter medications carefully.

### Stop the following medications 7 days before appointment:

- Allegra / Allegra-D (Fexofenadine)
- Atarax / Vistaril (Hydroxyzine)
- Axid (Nizatidine)
- Clarinex / Clarinex-D (Desloratadine)
- Claritin / Claritin-D / Alavert (Loratadine)
- Cyproheptadine
- Orange juice
- Pepcid (Famotidine)
- Probiotics
- Semprex-D
- Tagamet (Cimetidine)

- Vitamins and supplements (Especially Vitamin C)
- Xyzal (Levocetirizine)
- Zantac (Ranitidine)
- Zyrtec / Zyrtec-D (Cetirizine)

**Stop the following medications 3 days before appointment:**

- Astelin / Astepro / Dymista (Azelastine)
- Benadryl (Diphenhydramine)
- Chlorpheniramine
- Cyclizine
- Dimetapp
- Doxylamine
- Dramamine (Dimenhydrinate)
- Patanase
- Patanol / Pataday (Olopatadine)
- Promethazine

Thank you for your understanding and cooperation. Our goal is to provide safe, personalized care for every patient. If you have any questions or concerns about your testing appointment, please don't hesitate to contact our office at 315.701.9500 and to speak with our triage nurse. We are always happy to help.

By signing, you acknowledge that you have read, fully understand, and agree to the terms and conditions of the *Testing Appointment Policy*.

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Patient Name

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Account Number

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Signature of Patient or Legal Representative

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Date

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Printed Name of Patient or Legal Representative