



# Penn Medicine

## Becker ENT & Allergy

### MEDICATION INSTRUCTIONS FOR ALLERGY PATIENTS

Drugs which contain antihistamine or have antihistaminic effects can result in negative reactions to skin testing. As a result, it may not be possible to properly interpret skin test results, and testing may have to be repeated at a later date. While this list is extensive, it is NOT all inclusive (particularly of the various brand names). Discontinue ALL antihistamines including the following medications **seven (7) days prior** to skin testing (unless longer time specified):

#### **Antihistamines – Generic name (Brand name(s)):**

Cetirizine (Zyrtec, Zyrtec-D)	Hydroxyzine (Vistaril, Atarax)
Desloratadine (Claritinex)	Levocetirizine (Xyzal)
Fexofenadine (Allegra, Allegra-D)	Loratadine (Claritin, Claritin-D, Alavert)

Diphenhydramine (Aleve PM, Benadryl, Bayer P.M., Benylin, Contac P.M., Doans P.M., Excedrin PM, Legatrin P.M., Nytol, Tylenol Nighttime, Unisom, Zzzquil)

Chlorpheniramine (Aller-Chlor, Allerest, Alka Seltzer Plus, Chlor-Trimeton, Comtrex, Contac, Co-Pyronil, Coricidin, CTM, Deconamine, Dristan, Dura-tap, Naldecon, Ornade Spansules, Rondec, Sinutab, Teldrin, Triaminic, Triaminicin, Tylenol Allergy)

Azatadine (Optimine, Trinalin)	Doxylamine (Nyquil)
Brompheniramine (Bromfed, Dimetane, Dimetapp)	Meclizine (Antivert)
Carbinoxamine (Clistin, Rondec)	Pheniramine
Clemastine (Tavist)	Phenyltoloxamine (Nadecon)
Cyclizine (Marezine)	Promethazine (Phenergan)
Cyproheptadine (Periactin) ( <b>9 days</b> )	Pyrilamine (Mepyramine)
Dexbrompheniramine (Drixoral)	Quinacrine (Atabrine)
Dexchlorpheniramine (Extendryl, Polaramine)	Tripeleannamine (PBZ)
Dimenhydrinate (Dramamine)	Triprolidine (Actidel, Actifed)

#### **Antihistamines (Nasal Sprays)**

Azelastine (Astelin, Astepro, Dymista)	Olopatadine (Patanase)
--	------------------------

#### **Antihistamines (Eye Drops)**

Alcaftadine (Lastacaft)	Azelastine (Optivar)	Bepotastine (Bepreve)
Emadastine (Emadine)	Epinastine (Elestat)	Ketotifen (Zaditor, Alaway)

### **Antihistamines (H2 blockers):**

Cimetidine (Tagamet)   Famotidine (Pepcid)   Nizatidine (Axid)   Ranitidine (Zantac)

### **Tricyclic Antidepressants:**

\*\*Please consult your prescribing doctor before stopping these medications\*\*

Amitriptyline (Elavil, Etrafon, Limbitrol, Triavil)	Imipramine (Tofranil) ( <b>11 days</b> )
Amoxapine (Asendin)	Maprotiline (Ludiomil)
Clomipramine (Anafranil)	Nortriptyline (Pamelor)
Desipramine (Norpramin)	Protriptyline (Vivactil)
Doxepin (Silenor, Sinequan)	Trimipramine (Surmontil)

### **Other Antidepressant, Anxiety, and Sedative Medications:**

Eszopiclone (Lunesta)	Clonazepam (Klonopin)
Mirtazapine (Remeron)	Diazepam (Valium)
Quetiapine (Seroquel)	Lorazepam (Ativan)
Trazodone (Oleptra)	Midazolam (Versed)
Zolpidem (Ambien)	

Do not take over-the counter cold medications that contain antihistamines. Read the label and look for “antihistamine” in the active ingredient list.

<b>Drug Facts</b> Failure to follow these warnings could result in serious consequences.	<b>Purpose</b> <i>(in each 30 mL dose cup)</i>	<b>Drug Facts (continued)</b> Ask a doctor or pharmacist before use if you are: • taking sedatives or tranquilizers • taking the blood thinning drug warfarin	<b>Drug Facts (continued)</b> <b>Directions</b> • take only as directed - see Overdose warning • use dose cup or tablespoon (TBSP) • do not exceed 4 doses per 24 hrs						
<b>Active ingredients</b> <i>(in each 30 mL dose cup)</i> Acetaminophen 650 mg ..... Pain reliever/fever reducer Dextromethorphan HBr 30 mg ..... Cough suppressant Doxylamine succinate 12.5 mg ..... <b>Antihistamine</b>	<b>Purpose</b> <i>(in each 30 mL dose cup)</i> Acetaminophen 650 mg ..... Pain reliever/fever reducer Dextromethorphan HBr 30 mg ..... Cough suppressant Doxylamine succinate 12.5 mg ..... <b>Antihistamine</b>	<b>When using this product</b> • do not use more than directed • excitability may occur, especially in children • marked drowsiness may occur • avoid alcoholic drinks • be careful when driving a motor vehicle or operating machinery	<table border="1"> <tr> <td>adults &amp; children 12 yrs &amp; over</td> <td>30 mL (2 TBSP) every 6 hrs</td> </tr> <tr> <td>children 4 to under 12 yrs</td> <td>ask a doctor</td> </tr> <tr> <td>children under 4 yrs</td> <td>do not use</td> </tr> </table> <p>* when using other DayQuil® or NyQuil products, carefully read each label to insure correct dosing</p>	adults & children 12 yrs & over	30 mL (2 TBSP) every 6 hrs	children 4 to under 12 yrs	ask a doctor	children under 4 yrs	do not use
adults & children 12 yrs & over	30 mL (2 TBSP) every 6 hrs								
children 4 to under 12 yrs	ask a doctor								
children under 4 yrs	do not use								

You can continue all asthma medications, other eye drops, and other nasal sprays as prescribed. Also, continue all other medications for conditions other than allergies such as heart medications, blood pressure medications, etc.

If your appointment date does not allow you to discontinue these medications 7 days in advance, please contact the location where you were scheduled for allergy testing in order to reschedule (<https://www.beckerentandallergy.com/appointments/call-for-an-appointment>). Remember to arrive 15 minutes early for paperwork and vital signs. Pediatric patients must be accompanied by a parent or medical guardian.