In attempt to determine whether your child has symptoms as a result of an allergy or adverse reaction to food, an evaluation may be performed by feeding the food either openly or blindly. The type of test depends upon the food or food substance involved and the symptoms that occurred. These challenges are considered to be "specialty tests" since they require more time, are more involved, and have the potential for greater risk than other allergy tests (e.g. skin testing). The food challenge involves the ingestion of food or other ingestible food substance to determine whether a reaction will occur. A single amount maybe ingested or graded gradually increasing amounts may be given at varying intervals depending upon the history and material being tested. After each dose your child will be monitored for symptoms whether they are similar to those previously experienced or are new. The test dose is increased gradually until symptoms occur and the challenge is stopped, or until a significant portion has been consumed and the test is considered negative. Subsequent steps for re-introduction of the food into the diet will then be discussed with the physician.

There is always a risk associated with a challenge procedure. The possibility of reproducing previously experienced symptoms is the most likely response. These symptoms could include runny nose, itchy watery eyes, coughing, wheezing, difficulty breathing, throat closing, itching, swelling, hives, nausea, vomiting, and diarrhea. However there are also unpredictable and potentially serious side effects that may occur. These could include irregular heartbeat, fall in blood pressure (shock), or cardiac arrest. Delayed reactions could occur after leaving the office. Appropriate medications are available to reverse such reactions should they occur. However, in the unlikely circumstance of a severe allergy reaction that does not respond to treatment the possibility of a fatal reaction exists.

These tests are important part of your child’s assessment. We fully acknowledge and encourage you participating in the decisions relative to your care. You are under no obligation to agree to any tests if you do not feel comfortable with the procedure.

Please consult with the doctor or any member of the staff if you have any questions before signing this consent form.

After reading this consent form, I agree to the following:

1) I understand the test to be performed
2) I understand that the test may result in symptoms
3) I agree to have this challenge performed
4) I understand that I may refuse the test and that my refusal will not affect my care.
5) Alternatives to the challenge have been discussed.

The test procedure, risks, and alternative have been explained to me. I have had the opportunity to ask questions about the procedure and alternatives to the challenge and have had my questions answered before the challenge begins.

Patient’s Printed Name

Patient/Responsible party signature

Date

Witness Signature

Date

Physician’s signature

Date
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<tr>
<th>Time</th>
<th>Pulse</th>
<th>RR</th>
<th>BP</th>
<th>Abd Pain</th>
<th>Nausea</th>
<th>Vomiting</th>
<th>Diarrhea</th>
<th>Rhinitis</th>
<th>Asthma</th>
<th>Rash</th>
<th>Eczema</th>
<th>Pallor</th>
<th>Changed</th>
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<th>Activity</th>
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<td>Rhinitis</td>
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FOOD CHALLENGES AT

Food challenges are done under observation so that we may observe the onset and sequence of symptoms and so that we may treat reactions that occur that might need medication.

Challenges start in the morning. The food is given in a small dose to begin the challenge and then the dose is increased at intervals which are determined from the history of previous reactions. The challenge is scheduled in advance with who will instruct you concerning what food should be brought along. We may ask you to bring the challenge food and a vehicle to hide it in. We may just ask you to bring the vehicle that we will hide the food in, and we will provide the challenge food.

When you arrive, you or your child will be briefly examined by a doctor so that the challenge may begin. The physical exam is to ensure that there are not already symptoms present that could interfere with the interpretation of any reaction. If the individual to be challenged, is ill even with a mild cold, you should call us so that we may reschedule the challenge for a time when there are no symptoms. If chronic symptoms (runny nose, eczema) are continuing be sure we have discussed whether the challenge can be done. We do not challenge anyone with active asthma symptoms.

At the end of the challenge (usually 3-4 hours) you will have a discussion with the doctor concerning the results of the challenge and what steps should be taken to continue avoidance of the food or the procedure for re-introducing it into the diet. At that time we will attempt to answer all your questions regarding the challenge, interpretation, and next steps.

If there are questions about other medical issues they may require a separate appointment.