

Allergy and Asthma Institute of SE Michigan

There is a flat fee of \$20.00 for the standard FARE and/or AAP forms or your school equivalent. This also includes any medical administration forms that may be needed. We will supply the FARE and/or AAP forms. You will need to supply all medical administration forms and if your school requires a propriety version of FARE/AAP those will need to be supplied as well. Please contact your school for a PDF copy of medical administration forms and their proprietary FARE/AAP forms if applicable. AAI will only process PDFs for the completion of school forms.

Email this completed form and all forms needed to: aaiforms@gmail.com.

Information needed for the completion of all school forms:

Requesting Food Allergy Action Plan (FARE)

☐ YES ☐ NO

Requesting Asthma Management Plan (AAP)

☐ YES ☐ NO

If your school has a proprietary form they require in place of the FARE or AAP you will need to supply those forms.

Patient Name:

Date of Birth:

Current Weight:

If the student has **food allergies**, please list allergens.

Is the student an OIT patient or graduate

☐ YES ☐ NO

Student may self-carry Epinephrine

☐ YES ☐ NO

Student may self-administer Epinephrine

☐ YES ☐ NO

Parent/Guardian Preference on how school should respond if potential or definitive exposure occurs. *If you do not select one of the below options regarding Epinephrine administration the school would respond with observation only.*

Should Epinephrine be given immediately if allergen was:

☐ LIKELY eaten ☐ DEFINITELY eaten

New Epinephrine prescription needed ☐ YES ☐ NO

Our office will prescribe epinephrine as the default unless you advise AUVI Q is preferred. AUVI Q can have a copay of up to \$150.00.

Would you prefer that we specifically prescribe AUVI Q ☐ YES ☐ NO

Please advise which pharmacy you would like the prescription sent:

If the student has **Asthma**, please list triggers.

Is the student on a daily controller medication for Asthma ☐ YES ☐ NO

Student may self-carry Albuterol ☐ YES ☐ NO

Please list all current medications being taken:

Please list all medicines that your school will require an administration form for. Please note we recommend Zyrtec, if you require Benadryl, please indicate here if that is the preferred antihistamine. If you have indicated that a medical administration form or forms are needed, you will need to supply this form to our office for completion. Medical administration forms are proprietary and must be supplied with your forms request. There is not a universal form for this purpose.

Turn around times for forms completion begin once all details have been provided and the invoice sent via our credit card processing platform has been paid. When you pay the invoice, a notification is sent to us which will begin the forms process. Complete forms requests* paid for after 10:00 am will begin processing the following business day.

- | | |
|----------------------------------------------------|------------------------------------------|
| <input type="radio"/> Standard 10-12 business days | NO CHARGE (form fees still apply) |
| <input type="radio"/> 3 Business Days | \$25.00 |
| <input type="radio"/> 2 Business Days | \$50.00 |
| <input type="radio"/> 1 Business Day | \$75.00 |

*Complete forms request includes this form with all information completed, medication forms if needed, any school proprietary forms and payment.

Email where invoice and forms should be sent:

If forms are completed based on the information provided here and changes and or additions are needed additional charges may apply.

If the patient has not had a follow-up appointment with their Physician or with the PA working with their Physician in the last 365 days an annual visit will needed before any school forms request can be completed. OIT visits (challenge, day one or up doses) are not considered a follow up/annual appointment. Please contact the office to schedule a visit should one be needed for forms completion.