



QUESTIONS to EVALUATE YOUR CHILD'S PENICILLIN or PENICILLIN-LIKE ALLERGY

1. There are 4 sections to determine your child's penicillin allergy type.
2. Please answer each question by choosing YES or NO
3. Name of allergic antibiotic _____ or fill in "Unknown"

Section 1

THIS WILL DETERMINE IF YOUR CHILD HAS A RARE SEVERE ALLERGY.

Step 1

Does your child have a history of ANY of the following reactions after taking an antibiotic? **THE REACTION MAY HAVE OCCURRED ALMOST IMMEDIATELY OR UP TO SEVERAL WEEKS** after taking the antibiotic. Please check "Yes" or "No" (or circle Yes or No if printed out). (Titles below are for health care provider use)

1. SJS/TEN
 - Rash devoping into blisters all over your child's body YES NO
 - Mouth sores YES NO
 - Redness of the eyes YES NO
2. DRESS
 - Rash all over your child's body followed by peeling of the skin YES NO
 - Rash with mouth sores, swollen glands, liver or kidney problems YES NO
3. AGEP
 - Rapidly spreading, pin-sized pus-filled, blister-like sores all over your child's body YES NO
4. SSLR
 - Rash and joint pains YES NO

5. VASCULITIS
- Purple rash with kidney or lung damage YES NO

6. ORGAN SPECIFIC
- Damage to liver, kidneys or blood count YES NO

If “YES” to any question(s), your child is **SEVERELY ALLERGIC** to penicillin and any of the penicillin-like antibiotics.

Your child should not take any penicillin or penicillin-like antibiotics until you are evaluated by your child’s healthcare provider.

****YOU DO NOT HAVE TO ANSWER ANY OTHER QUESTIONS.****

If “NO” go to **Step 2**.

Section 2

THIS WILL DETERMINE IF YOU HAVE A SEVERE IMMEDIATE ALLERGY.

Step 2

Does your child have a history of any of the following reactions after taking an antibiotic?

- Sudden onset of shortness of breath, wheezing, cough or high-pitched whistling sound while taking a deep breath YES NO
- Passed out YES NO
- Total body rash with welts that itch YES NO
- Swollen lips, tongue or throat tightness YES NO
- Abdominal pain or vomiting YES NO

If “YES” to any question(s), your child is **SEVERELY ALLERGIC** to penicillin and any of the penicillin-like antibiotics.

Your child should not take any penicillin or penicillin-like antibiotics until you are evaluated by your child’s healthcare provider.

****YOU DO NOT HAVE TO ANSWER ANY OTHER QUESTIONS.****

If “NO” go to **Step 3**.

Section 3

THIS WILL DETERMINE IF YOUR CHILD IS NOT ALLERGIC.

Step 3

Has your child had any of the following **NON ALLERGIC** reactions to an antibiotic?

- | | | |
|---|-----|----|
| • Headache | YES | NO |
| • Diarrhea, nausea, vomiting or abdominal pain | YES | NO |
| • Flat rash without welts | YES | NO |
| • Itching without a rash | YES | NO |
| • Does your child have a family history of penicillin allergy | YES | NO |

If “YES”, your child is **NOT ALLERGIC** to penicillin and any of the penicillin-like antibiotics.

****YOU DO NOT HAVE TO ANSWER ANY OTHER QUESTIONS.****

If “NO” go to **Step 4**.

Section 4

THIS WILL DETERMINE IF YOUR CHILD HAS A **DELAYED (NON-SEVERE) ALLERGY** AND ARE AT A **LOW RISK** FOR TAKING THE ANTIBIOTIC.

Step 4

Since your child’s antibiotic reaction, has your child taken any of the following antibiotics without any reaction?

- | | | |
|-------------------------------------|-----|----|
| Ampicillin | YES | NO |
| Amoxicillin | YES | NO |
| Amoxicillin/Clavulanate (Augmentin) | YES | NO |
| Cephalexin (Keflex) | YES | NO |
| Cefadroxil (Duricef) | YES | NO |

Cefuroxime (Ceftin)	YES	NO
Cefaclor (Ceclor)	YES	NO
Cefixime (Suprax)	YES	NO
Ceftriaxone (Rocephin)	YES	NO
Penicillin - oral, injection	YES	NO
Cefdinir (Omnicef)	YES	NO

If “YES”, your child is **NOT ALLERGIC** to penicillin and any of the penicillin-like antibiotics.

****YOU DO NOT HAVE TO ANSWER ANY OTHER QUESTIONS.****

If “NO” or “UNKNOWN” go to **Step 5**.

Step 5

Has the time since the reaction been **greater than 5 years or unknown?** YES NO

If “YES”, your child **most likely does not have** a penicillin or penicillin-like allergy or has outgrown it. You need to check with your child’s healthcare provider and should not take this type of antibiotic until your child is evaluated.

****YOU DO NOT HAVE TO ANSWER ANY OTHER QUESTIONS.****

If “NO” or “UNKNOWN” go to **Step 6**.

Step 6

Did the reaction occur **greater than 6 hours** after your child received the antibiotic? YES NO

If “YES”, your child **most likely does not have** a penicillin or penicillin-like allergy or has outgrown it. You need to check with your child’s healthcare provider and should not take this type of antibiotic until your child is evaluated.

If “NO” to any question(s), your child is **SEVERELY ALLERGIC** to penicillin and any of the penicillin-like antibiotics

Your child should not take any penicillin or penicillin-like antibiotics until your child is evaluated by your child’s healthcare provider.