

# NEW PATIENT ALLERGY HEALTH HISTORY



Allergy  
Physicians Calgary  
403Allergy.ca

5918 - 3rd St SW  
Calgary, AB T2H 0H8  
T: 403-ALLERGY (255-3749)

**PATIENT NAME:**

**Allergy testing material is not covered by your provincial health plan**  
**The fee for allergy testing is \$45 (for contact patch testing it is \$97)**

Family Doctor: \_\_\_\_\_

Why are you seeing us today - please be more specific than 'Allergy Test':

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Have you had allergy testing before? If yes, when and what were the results?

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## ENVIRONMENTAL HISTORY

**Current** pets? Please put number and for how long:

Cat How many? Years?

Dog How many? Years?

Other animals?

Do pets sleep in your bedroom?

Yes  No

How long have you lived in Alberta?

Other areas of out of province residence:

If your child is the patient, does s/he live in a second home i.e. separated parents?

Yes  No

Adult occupation (this may impact allergies):

Do you smoke?

Tobacco  Yes  No

Cannabis daily  Yes  No

Smokers living with you?

Yes  No

## MEDICATIONS

Are you allergic to any medications?  Yes  No If yes, please list:

What are your current medications? (please be more specific than 'Inhalers' or 'creams')

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**FAMILY HISTORY – only check boxes if positive. You do not need to fill each square**

	Seasonal or Animal Allergies	Food Allergy <i>diagnosed by physician</i>	Asthma	Celiac Disease	Drug Allergy
Mother					
Father					
Brother/Sister (circle)					
Brother/Sister (circle)					
Brother/Sister (circle)					
Brother/Sister (circle)					