

You are schedule to have an allergy skin test. Please **STOP** taking **ALL** your allergy medications 3 days prior your exam. If you have any questions please call (915) 544-1350.

***\* Claritin(Loratadine)***  \****Allegra(Fexofenadine) \*Dymista \*Zyrtec(Cetirizine)***

[](http://www.google.com/imgres?q=allergies&start=256&biw=1312&bih=706&tbm=isch&tbnid=cOydNpJ1ytG0fM:&imgrefurl=http://allergyhater.com/?p=99&docid=o0FE59yXf35FTM&imgurl=http://sweetandsassyhousewife.com/wp-content/uploads/2013/04/melody-covino-allergies1.jpg&w=485&h=350&ei=I83BUc3hJvex4AOZ5YGAAQ&zoom=1&iact=rc&dur=16&page=9&tbnh=138&tbnw=200&ndsp=32&ved=1t:429,r:56,s:200,i:172&tx=50&ty=58)

***\*Astepro Nasal Spray \*Singulair(Montelukast) \*Benadryl(Diphenhydramine) \*Clarinex(Desloratadine) \*Xyzal( Levocetirizine Dihydrochloride)***

Esta programado/a para tener un examen para determinar que clase de alergias tiene, porfavor **PARE** de tomar todos sus medicamentos para la alergia 3 dias antes de su examen. Si tiene preguntas porfavor de llamar a (915) 544-1350.