**Informed Consent**

Unfortunately, we are in unprecedented times with the current Covid-19 pandemic. To try to keep you and our staff safe we are instituting the following protocol. The purpose of this protocol is to try to reduce the risk of infection among patients and staff. We can not guarantee you will not get infected by coming to this or any medical facility.

**We request that you “not” come to the office if you have a fever (100.4°).**

The following protocol is being done to limit the number of patients in the waiting room area and in the total office area. I understand that my allergy/biological injection therapy is an elective procedure. I am also aware that without my injection therapy; my asthma, allergy or sinus condition may worsen and require steroids.

I agree to follow the recommendations of this allergy office and comply with the new temporary protocols.

All patients must text and send confirmation that they waited the full 30 minute time period before they leave the office area. We will send confirmation of your text as well.

Failure to abide with this policy can forfeit your chance to continue with your injection therapy.

**Corona Virus Outbreak Injection “Temporary Protocol”**

**(Allergen Injection and Biological Injections)**

1. We are trying to avoid patients having to closely congregate and wait for long periods in the waiting room.
2. All patients can get their therapy with close cooperation with the staff upon signing a new consent form covering the Corona Virus Outbreak Temporary Protocol.
3. Patients will first have their temperature taken before entering facility.
4. If you have a normal temperature you can go directly to the shot station and get your injection.
5. You will be allowed to wait in the courtyard area or your car.
6. After 30 minutes please text this number (**480-408-2772)** to let us know there are no problems with your injection and then you may leave. Any patient having any issue with their injection can immediately enter the office for assessment and treatment.

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Signature Date