



OFFICE OF STUDENT LIFE

STUDENT HEALTH CENTER

Dear Referring Allergist:

In an effort to provide the safest and most efficient care for our mutual patients, we are asking that you review our Policies and Procedures and complete our required forms. These are located on our website: healthcenter.indiana.edu
Medical → Allergy Injections

The forms required are: **REVIEW ALLERGIST AGREEMENT**
ALLERGEN IMMUNOTHERAPY ORDER FORM

Please complete the forms and send to us with your patient's allergy serum either via mail with serum or by fax to 812-856-8729. We will not be able to service any student who does not have completed paperwork on file.

All students receiving allergy injections will be required to carry an Epi Pen or Auvi-Q injector on their allergy injection day.

We look forward to working with you to provide your patient with allergy injections while they are students at Indiana University Bloomington. We are happy to answer questions or give assistance if needed at 812 – 855 - 7514

Thank you,
Mary Lou Nierzwicki, NP Interim Medical Director
Alicia Marte RN
Samantha Eads RN

Rev 10/2/2023

IMMUNIZATION DEPARTMENT

600 N Eagleson Ave - Bloomington, IN 47405 – Phone 812-855-7514 Fax: 812-856-8729