Penicillin Allergy Reassessment for Treatment Improvement (PARTI) Tool

PART 1 (Completed by the dentist)

You are a candidate for allergy reassessment because (check all that apply):

☐ Not a true allergy  ☐ Allergic reaction was >5 years ago
☐ Error in chart  ☐ Allergy does not prevent penicillin use
☐ Other – Please specify:__________________________

Dentist Name: ________________________________
Dentist Contact info: __________________________

PART 2 (Completed by the patient)

Patient Name: ________________________________

You will discuss allergy reassessment with a healthcare provider and/or allergist.

Healthcare Provider Name: _______________________
Healthcare Provider Contact info: __________________
Appointment date(s) for allergy reassessment and/or testing*
Healthcare provider: ____________________________
Allergist: _________________________________

*It may take multiple visits for you to receive allergy testing.

PART 3 (Completed by healthcare provider that completes allergy testing)

I agree that you (check all that apply):

☐ Have a true penicillin allergy.  ☐ Require further allergy testing.
☐ Do not have a true penicillin allergy.

Why Does This Matter?

Allergies Are Rare.

WHO: You are a patient that has been identified as benefitting from allergy testing for using penicillin

WHY: Antibiotics are prescribed when a patient is allergic to penicillin and are often associated with harsh side effects

WHAT: Only 1% of the population has a true penicillin allergy

WHEN: As soon as possible, visit your healthcare provider to see if you are a candidate for allergy reassessment and/or testing to improve antibiotic therapy

Patient Follow-up Checklist

Communicate your updated allergy status with your providers, who can update your Health Records, by sharing this card with them as soon as possible.

☐ Dental Office  ☐ Pharmacy
☐ Healthcare Clinic  ☐ Hospital

DISCLAIMER: This is a tool for penicillin allergy screening, communication, and documentation and is not designed for risk assessment or diagnosis.