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Allergic Rhinitis	Referral Guide: Page 1 of 1		ENT
Diagnosis/Definition:	1 ago 1 oi 1		L
Initial Diagnosis and Management:			
Symptoms of discharge, itching, sneezing, congestions and pressure as reported by the patient. Symptoms can be attributed to seasonal exposure or environmental exposure, for example, pets and dust mites. Management: -Nasal steroids -Antihistamine both sedating and non-sedating -Decongestants			
Ongoing Management and Objectives:			
Consistent use of nasal steroids and/or antihistamine to alleviate significant symptoms.			
Indications for Specialty Care Referral:			
-Unsuccessful trial (2-3 weeks for each agent) of medication therapy (poor response or medication intolerance) using nasal steroids, oral or nasal antihistamine +/-decongestants, as indicated by persisting interference with normal activities including sleep, work or school performanceSignificant comorbid conditions including eczema, sinusitis, and asthmaSignificant complications not responding to treatment of the underlying condition, including otitis media, sinusitis, nasal polyposis and hyposmia/anonsmiaRecurring requirement for IM or oral corticosteroidsNeed ot identify allergic/environmental triggers in order to provide education on trigger avoidance and medication useMultiple medications over a prolonged period (i.e., 4-6 months) needed to maintain control of symptomsConsider early referral for children requiring constant or intermittent use of nasal steroids.			
Test(s) to Prepare for Consult:		Test(s) Consulta	ant May Need To Do:
Criteria for Return to Primary Care:			
Controlled nasal symptoms as reported by the patient. Effective regimen that is well tolerated.			
Revision History: Created Revised			

Disclaimer: Adherence to these guidelines will not ensure successful treatment in every situation. Further, these guidelines should not be considered inclusive of all accepted methods of care or exclusive of other methods of care reasonably directed to obtaining the same results. The ultimate judgment regarding the appropriateness of any specific procedure, therapy, or referral must be made by the physician/provider in light of all circumstances presented by an individual patient.