



Adult and Pediatric Allergy/Immunology  
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## **POLICY RE: ADMINISTERING ANOTHER OFFICE'S IMMUNOTHERAPY**

The Tankersley Clinic's core values are Integrity, Service before Self and Excellence in all we do. Dr. Tankersley is a fellowship-trained and board-certified Allergist/Immunologist. Consistent with our core values, Dr. Tankersley's qualifications as an Allergist/Immunologist, and published national practice parameters, the following criteria must be met in order for us to administer another Allergist's immunotherapy:

1. The prescribing provider must be a board-certified Allergist/Immunologist.
2. The prescribing Allergist/Immunologist must personally contact Dr. Tankersley to arrange the administration of their patient's immunotherapy.
3. The allergen dosing in the immunotherapy must be in accordance with national practice parameter dosages.
4. The prescribing Allergist will need to provide their immunotherapy prescription to Dr. Tankersley for his review.
5. The prescribing Allergist must continue to see the patient at least once a year with documentation of this visit provided to Dr. Tankersley.

In addition to the above five criteria, Dr. Tankersley also will have an initial appointment with the patient to review their condition and sign a written consent for the administration of the other Allergist's immunotherapy.

Dr. Tankersley still welcomes new patients to our practice if the above five criteria are unable to be met. At the initial visit, he will perform an initial allergy evaluation and discuss treatment options. If a patient desires to be under the care of Dr. Tankersley and have him write a new immunotherapy prescription, he can then perform skin testing at that visit or a future visit so that a new immunotherapy prescription can be written.

A new immunotherapy prescription would be with our allergen extract using optimum therapeutic doses as recommended in the national practice parameters reference above. The build-up schedule Dr. Tankersley uses is 30-40 visits with injections given 1-2 times per week. Each injection is followed by a 30 minute wait in the clinic. Once a maintenance dose is reached, injections are then provided once monthly for five years in accordance with national practice parameters.

It is important for patients to understand that immunotherapy (allergy shots) is unique to an individual patient and based on the results of their clinical history and skin testing. In the United States, any licensed provider can perform skin testing and write an immunotherapy prescription. Because of the wide spectrum of training of licensed providers in the US, both the American Academy and the American College of Allergy, Asthma and Immunology have published national practice parameters re: the dosing and administration of immunotherapy. Because appropriately dosed immunotherapy can be associated with fatal anaphylaxis, immunotherapy must be delivered in a clinical office with a medical provider (physician, nurse practitioner or physician assistant) available to treat anaphylaxis. Patients must wait in the clinic for 30 minutes after an immunotherapy injection is administered. Though rare, an average of two fatalities occur each year related to anaphylaxis following an immunotherapy injection.

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