

	Clinical Protocol: Allergy and ENT Referral for Allergic Rhinitis	
	ORIGINAL EFFECTIVE DATE: 05/29/2019	REVIEWED/REVISED DATE(S): 08/13/21
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PROTOCOL OVERVIEW

This Clinical Protocol advises on guidelines and indications for allergy or ENT referral for Allergic Rhinitis.

INDICATIONS

Clinical Indications for Referral:

Allergy referral for evaluation or management:

- Allergy testing being considered
- 2 or more treatments with systemic steroids
- Adverse events from, or failure to respond to pharmacotherapy
- Rule out conditions that mimic allergic rhinitis:
 - Aspirin sensitivity or drug-induced rhinitis
 - Eosinophilia syndrome or eosinophilic granulomatosis with polyangiitis

ENT referral for evaluation or management:

- Chronic or recurrent sinusitis or otitis media
- Suspected neoplasm
- Inability to smell or taste
- Nasal polyps or turbinate hypertrophy
- Sleep disturbance
- Septal deviation or other orofacial deformities
- Rule out other conditions:
 - Vasomotor or nonallergenic rhinitis
 - CSF leak
 - Ciliary dyskinesia

RECOMMENDED RECORDS

- Clinical notes describing the member's signs and symptoms and conservative management attempted; e.g., nasal steroids
- Consult notes (if obtained) by ENT

CITATION

MCG, Ambulatory Care, "Allergic Rhinitis – Referral Management", 2/26/2019