

STANDARD DATA COLLECTION FORM

Lot No. _____

Date Applied _____

Date
1st Reading _____

Date
2nd Reading _____

Date
3rd Reading _____

Patient's Name _____

Chart No. _____ Age _____ Sex (M/F) _____ Race _____

Physician's Name _____

Address _____ Phone _____

City _____ State _____ ZIP _____

| POSITIVE REACTIONS | CLINICAL RELEVANCE | | | |
|--------------------|--------------------|---------|------|---------|
| | Allergen No. | Present | Past | Unknown |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

| PANEL 1.3 | |
|--|--|
| 1 = Nickel Sulfate 1st _____ 2nd _____ 3rd _____ | 7 = Colophony 1st _____ 2nd _____ 3rd _____ |
| 2 = Wool Alcohols 1st _____ 2nd _____ 3rd _____ | 8 = Paraben Mix 1st _____ 2nd _____ 3rd _____ |
| 3 = Neomycin Sulfate 1st _____ 2nd _____ 3rd _____ | 9 = Negative Control 1st _____ 2nd _____ 3rd _____ |
| 4 = Potassium Dichromate 1st _____ 2nd _____ 3rd _____ | 10 = Balsam of Peru 1st _____ 2nd _____ 3rd _____ |
| 5 = Caine Mix 1st _____ 2nd _____ 3rd _____ | 11 = Ethylenediamine Dihydrochloride 1st _____ 2nd _____ 3rd _____ |
| 6 = Fragrance Mix 1st _____ 2nd _____ 3rd _____ | 12 = Cobalt Dichloride 1st _____ 2nd _____ 3rd _____ |

| PANEL 2.3 | |
|---|--|
| 13 = <i>p</i>-tert Butylphenol Formaldehyde Resin 1st _____ 2nd _____ 3rd _____ | 19 = Methyl dibromo Glutaronitrile 1st _____ 2nd _____ 3rd _____ |
| 14 = Epoxy Resin 1st _____ 2nd _____ 3rd _____ | 20 = <i>p</i>-Phenylenediamine 1st _____ 2nd _____ 3rd _____ |
| 15 = Carba Mix 1st _____ 2nd _____ 3rd _____ | 21 = Formaldehyde 1st _____ 2nd _____ 3rd _____ |
| 16 = Black Rubber Mix 1st _____ 2nd _____ 3rd _____ | 22 = Mercapto Mix 1st _____ 2nd _____ 3rd _____ |
| 17 = Cl+ Me-Isothiazolinone 1st _____ 2nd _____ 3rd _____ | 23 = Thimerosal 1st _____ 2nd _____ 3rd _____ |
| 18 = Quaternium-15 1st _____ 2nd _____ 3rd _____ | 24 = Thiuram Mix 1st _____ 2nd _____ 3rd _____ |

| PANEL 3.3 | |
|--|--|
| 25 = Diazolidinyl Urea 1st _____ 2nd _____ 3rd _____ | 31 = Hydrocortisone-17-Butyrate 1st _____ 2nd _____ 3rd _____ |
| 26 = Quinoline Mix 1st _____ 2nd _____ 3rd _____ | 32 = Mercaptobenzothiazole 1st _____ 2nd _____ 3rd _____ |
| 27 = Tixocortol-21-Pivalate 1st _____ 2nd _____ 3rd _____ | 33 = Bacitracin 1st _____ 2nd _____ 3rd _____ |
| 28 = Gold Sodium Thiosulfate 1st _____ 2nd _____ 3rd _____ | 34 = Parthenolide 1st _____ 2nd _____ 3rd _____ |
| 29 = Imidazolidinyl Urea 1st _____ 2nd _____ 3rd _____ | 35 = Disperse Blue 106 1st _____ 2nd _____ 3rd _____ |
| 30 = Budesonide 1st _____ 2nd _____ 3rd _____ | 36 = 2-Bromo-2-Nitropropane-1,3-diol 1st _____ 2nd _____ 3rd _____ |

Description Codes for Patch Test Results:

Extreme Positive Reaction (+++): spreading, bullous, ulcerative

Strong Positive Reaction (++) : erythema, edema, papules and vesicles

Weak Positive Reaction (+): nonvesicular, erythema, infiltration, possibly papules

Doubtful Reaction(?): macular erythema only

Irritant Reaction (IR)

Negative Reaction (-)