

**Grand View University Health Services
515-263-2823**

Latex Allergy Questionnaire

Have you ever suffered from:

	Yes	No	If yes, please explain
Allergic Rhinitis			
Allergic Conjunctivitis			
Asthma			
Bronchitis			
Eczema			
Hay Fever			
Hives			
Sinus Problems			
Unexplained Rash			
Reactions to Band-Aids and Tape			

Have you ever reacted after handling:

	Yes	No	If yes, please explain
Balloons			
Rubber Products			
Clothing with elastic or stretchy fabrics			
Elastic Bandages			
Poinsettias			

Have you ever had any of the following symptoms after dental work?

	Yes	No	If yes, please explain
Itching			
Tearing			
Fatigue/drowsiness			
Sneezing			
Runny nose			
Facial swelling/redness			

Have you ever reacted after eating:

	Yes	No	If yes, please explain
Bananas			
Avacados			
Tropical fruit/kiwi/papaya			
Chestnuts			
Shellfish			
Do you wear latex gloves?			
Do your fellow healthcare workers wear gloves?			
Do you suffer from skin rashes on your hands when you wear latex gloves?			
If you have tried non latex gloves, did your problem persist?			
Have you had several surgical procedures?			
Do you have a history of a spinal cord injury?			

Name

Date

SSN

Signature