

**UNC Department of Dermatology
Pre-Visit Instructions**

1. What is patch testing?

Patch testing is a method for detecting contact allergies to specific chemicals in substances that come in contact with the skin. These chemicals may be found in items such as topical lotions, creams, medicines, gloves, shoes, clothing, jewelry, hair dyes, other cosmetics, perfumes, and numerous other sources in the environment. The chemicals or substances to be tested are applied to the skin in appropriate concentration and covered with tape, usually for 48 hours.

2. Will patch testing detect all my allergies?

No. Patch testing detects only one type of allergy, the type that produces redness, itching, and sometimes tiny blisters on the skin. The type of allergy that causes sneezing, sinus congestion, asthma, or hives is detected by another technique called scratch testing. This type of allergy is usually caused by cat or dog hair, trees, grasses, flowers, and the like.

3. What should I bring to the patch test clinic?

Bring all articles such as shoes, gloves, cosmetics, medications, plants, etc., which you suspect might be causing or aggravating your rash. Bring anything else which is coming into contact with your skin at the site(s) of your rash such as cosmetics, lotions, creams, perfumes, and topical medications, even if not being used currently. All of these items are needed on the **FIRST APPOINTMENT**. Use a shopping bag if necessary. The doctor in the clinic will decide if you need patch testing to these items. *Do not bring laundry and bar soaps, detergents, fabric softeners or shampoos unless you strongly suspect they may be causing your rash.* If you are unable to bring samples, bring a list of all the materials involved and include all creams and ointment involved in your treatment.

4. What is the patch test application site?

Usually the back, no corticosteroid (“cortisone”) creams or ointments or over-the-counter lotions or creams should be applied to your back for several days, preferably about 2 weeks before coming in for patch testing.

5. Should my skin be clear of dermatitis?

Preferably yes. The back especially must be clear. This includes no sunburns. Please avoid sun exposure, including tanning beds and light therapy to your back. Please shave the back if hairy 2 days before patch test appointment to minimize the patch test discomfort during the procedure.

6. How many visits will be required?

Two or Three. Patch tests are usually applied on the first visit and the results are read on the second visit. A third visit is usually required.

7. How much time will each visit take?

The first visit is the longest; it usually takes 1-2 hours depending on the number of patches applied. At that visit, you will be interviewed about your skin problem and exposures to potential contact allergens and irritants. Information we collect in the interview, together with the suspect agents you bring to us, will form the basis for our patch testing. The second and third visits may last about 1 hour. Unfortunately there is an unavoidable wait.

8. Can any medications interfere with the patch test?

Yes, oral “cortisone” such as prednisone, Betamethasone, and Medrol tablets and injections of “cortisone” such as Kenalog. We generally prefer that you take no “cortisone” pills for one week before patch testing and receive no injections of “cortisone” for four weeks before patch testing.

9. Are patch tests safe?

Patch tests are generally very safe. They have been used on thousands of patients, and side effects are rare. Common things patients notice are itching, sweating, tape pulling or feeling tight, discomfort and stickiness when tape is pulled off, redness, burning, itching, and sometimes blisters (where a test turns positive).

Occasionally, we observe a mild flare of the patient’s original dermatitis, inflammation of the hair follicles (folliculitis) under tape, and a persistent rash at the positive site.

Rare occurrences are pain, sores, ulcer formation, permanent skin color changes or scar formation at a test site, development of an allergy to a test substance, a severe generalized flare of dermatitis and sudden hive-like reaction with breathing difficulty.