

UPLIZNA® (inebilizumab-cdon) Referral Form



Preferred Clinic (select one):

PATIENT INFORMATION

Referral Status: New Referral Updated Referral Referral Renewal

DOB:	Patient Name:	Patient Phone:	
Patient Address:		Patient Email:	
NKDA Allergies:		Weight (lbs/kg):	Height:
ICD-10 Code (required):	ICD-10 Description:	Last Treatment Date:	Last 4 Digits SSN:

PROVIDER INFORMATION

Referral Coordinator Name:	Referral Coordinator Email:		
Ordering Provider:	Provider NPI:		
Referring Practice Name:	Phone:	Fax:	
Practice Address:	City:	State:	Zip Code:

NURSING

Infusion to be administered per Vivo protocols.

UPLIZNA THERAPY ADMINISTRATION

LABORATORY ORDERS

- CBC at each dose every _____
- CMP at each dose every _____
- CRP at each dose every _____
- OTHER _____

Initial Dosing: 300 mg IV infusion followed two weeks later by a second 300mg IV infusion, then 300 mg every 6 months

Maintenance Dosing (check only if patient is currently on therapy):
300 mg IV infusion every 6 months

***Vivo Infusion will perform pregnancy screening prior to every infusion per Vivo policy*

REQUIRED DOCUMENTATION

PREMEDICATIONS

- acetaminophen (Tylenol) 500 mg 650 mg 1000 mg PO
- cetirizine (Zyrtec) 10mg PO
- loratadine (Claritin) 10mg PO
- diphenhydramine (Benadryl) 25 mg 50 mg PO IV
- methylprednisolone (Solu-Medrol) 40mg 125mg IV
- hydrocortisone (Solu-Cortef) 100mg IV
- Other: _____
- Dose: _____ Route: _____

- Patient Demographics** **HepB Core** (if available)
- Insurance Card/Information** **Hep B Surface Ag** (within 36 months)
- Progress Notes Supporting DX** **TB results** (within 6 months)
- Current Medication List and H&P** **AQP4**
- Serum Immunoglobulin**

Consider administering premedication for prophylaxis against infusion reactions and hypersensitivity reactions. **Order is valid for one year unless otherwise noted*

Provider Name (Print) **Provider Signature** **Date**

Email Referrals To: referrals@vivoinfusion.com OR Fax Below		Have a Question? Call (720) 902-4111	
Colorado: 303-418-4679	Michigan: 833-957-2188	New York: 800-540-1852	Texas: 469-340-0044
Connecticut: 203-724-4838	Minnesota: 763-290-0903	Ohio: 216-400-0674	Virginia: 804-500-5941
Florida: 904-930-4211	Nevada: 702-489-5744	Oklahoma: 918-770-4421	Wisconsin: 414-600-5383
Massachusetts: 781-202-1629	New Jersey: 609-955-3711	Pennsylvania: 215-399-9244	