

# Opdivo (nivolumab) 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:
Physician Preferred Method of Contact:	Email:	Fax:	Phone:

## NURSING

Infusion to be administered per Vivo protocols.

## LABORATORY ORDERS

CBC            at each dose            every \_\_\_\_\_

CMP            at each dose            every \_\_\_\_\_

CRP            at each dose            every \_\_\_\_\_

OTHER \_\_\_\_\_

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

## 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: \_\_\_\_\_

## OPDIVO THERAPY ADMINISTRATION

Please enter dose and frequency:

## REQUIRED DOCUMENTATION

- Patient Demographics
- Insurance Card/Information
- Progress Notes Supporting DX
- Current Medication List and H&P
- Complete Metabolic Panel

*\*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
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<b>Email Referrals To: <a href="mailto:referrals@vivoinfusion.com">referrals@vivoinfusion.com</a> OR Fax Below</b>		<b>Have a Question? Call (720) 902-4111</b>	
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	