



LEMTRADA® (ALAMTUZUMAB) ORDER FORM **STAT REQUEST**
(- Required Fields)* (*REASON MUST BE PROVIDED BELOW)

<input type="checkbox"/> New Referral	<input type="checkbox"/> Order Renewal	<input type="checkbox"/> Medication/Order Change	<input type="checkbox"/> Discontinuation Order
<input type="checkbox"/> Benefits Verification Only			

PATIENT INFORMATION			
NAME*:		DOB*:	SEX: M F
ADDRESS:		PHONE:	
WEIGHT: LBS	KG	HEIGHT:	EMAIL:
ALLERGIES:			

PHYSICIAN INFORMATION			
PHYSICIAN NAME*:		PRACTICE NAME:	
ADDRESS:		OFFICE CONTACT*:	
PHONE:	FAX:	EMAIL (FOR UPDATES):	

LEMTRADA ORDER*: <i>(SELECT ONE OF THE FOLLOWING)</i> <input type="checkbox"/> First Course: 12mg/day on 5 consecutive days <input type="checkbox"/> Maintenance Dosing: 12mg/day on 3 consecutive days every 12 months. <input type="checkbox"/> Okay to infuse at Multiple Locations	ICD-10*: _____ <input type="checkbox"/> Okay to Split Infusions Physician Signature* _____ Date* (Order is Valid for One Year) _____ <i>Infusion will be administered per MPP policy and protocols</i>
---	--

REQUIRED DIAGNOSIS:
<input type="checkbox"/> Relapsing Multiple Sclerosis <input type="checkbox"/> Other _____ <div style="color: red; font-size: small;"> *STAT REASON: (STAT request will be assessed per MPP policy and protocol) </div>

REQUIRED DOCUMENTATION CHECKLIST:
<input type="checkbox"/> Patient Demographics
<input type="checkbox"/> Insurance Card/Information
<input type="checkbox"/> Clinical/Progress Notes supporting DX
<input type="checkbox"/> Current Medication List and H&P
<input type="checkbox"/> HIV Test Results
<input type="checkbox"/> Varicella Zoster Antibodies
<input type="checkbox"/> TB Results (if available)-if positive, need negative chest Xray and negative TSpot
Last Infusion/Injection Date: _____

STANDING LAB ORDERS: <input type="checkbox"/> CMP <input type="checkbox"/> CBC <input type="checkbox"/> Labs to be drawn by Infusion Center Frequency _____
--

NOTES/ADDITIONAL COMMENTS:

Locations:

-----Colorado-----

Lakewood

-----Florida-----

Jacksonville
 Kissimmee
 Port St. Lucie
 Suncoast
 Winter Park

-----Texas-----

Arlington
 Cedar Hill
 Dallas
 Denton
 Ft. Worth
 Irving
 Rockwall
 Southlake
 Flower Mound
 Plano
 Tyler