



Fax Referrals To: (855) 891-2191
 Email Referrals To: referrals@vivoinfusion.com
 Have a Question? (855) 478-1528

REMICADE® (INFLIXIMAB) REFERRAL
 (* - Required Fields)

STAT REQUEST
 (*REASON MUST BE PROVIDED BELOW)

New Referral	Referral Renewal Benefits Verification Only	Medication/Treatment Change Discontinuation Order
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):
Remicade Infusion*: <i>(SELECT ONE OF THE FOLLOWING)</i> Initial/Reloading and then Maintenance Dose ____ mg/kg IV on day 0, 2, 6 weeks and every ____ weeks Maintenance Dosing: ____ mg/kg IV every ____ weeks		ICD-10*: _____ <i>(required & specific as possible)</i> Due to insurance limitations, biosimilars (Renflexis, Inflectra, Avsola) may be preferred. Please check box if okay to use a biosimilar.
Physician Signature* _____		Date*(Referral Valid for One Year) _____
*NPI # _____		<i>Infusion will be administered per VIVO policy and protocols</i>
ICD-10 Description: *STAT REASON: (STAT requests will be assessed per VIVO policy and protocols)	REQUIRED DOCUMENTATION CHECKLIST: Patient Demographics Insurance Card/Information Progress Notes supporting DX Current Medication List and H&P TB (w/in 6 months)-if positive, need negative chest Xray and negative TSpot Hep B Core (if available) Hep B Surface Antigen (within 36 months)	
Last Infusion/Injection Date: _____		
STANDING LAB REQUEST (to be drawn by clinic):	CMP	CBC *Frequency _____
Additional comments/notes:		

Locations:

-----Colorado-----

Lakewood

-----Florida-----

- ____ Jacksonville
- ____ Kissimmee
- ____ Port St. Lucie
- ____ Suncoast
- ____ Winter Park

-----Ohio-----

- Beachwood
- Middleburg Hts.
- Painesville
- Youngstown
- Westlake
- Fairlawn

-----Oklahoma-----

____ Tulsa

-----Texas-----

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