



option care health®

Dear Provider,

Specialty therapies can be complex, and complete information is essential to help ensure timely access to care.

The following prescriber order form is designed to capture the necessary clinical and patient information the dispensing pharmacy requires to begin the applicable prescribed therapy.

If your patient has elected to use Option Care Health, please fax completed form and required clinical documentation to **713-983-4647**.

Sincerely,  
Option Care Health

**ROZANOLIXIZUMAB-NOLI (RYSTIGGO®) PRESCRIBER ORDER FORM**

<b>Patient Name:</b>	<b>Date of Birth:</b>	<b>Gender:</b>
<b>Address:</b>		
<b>Phone:</b>	<b>Height:</b>	<input type="checkbox"/> inches <input type="checkbox"/> cm
	<b>Weight:</b>	<input type="checkbox"/> lbs <input type="checkbox"/> kg

**Clinical Information**

<b>Primary Diagnosis Description:</b>	<b>ICD-10 Code:</b>
<b>Allergies:</b> <input type="checkbox"/> NKDA or (List):	

**Prescription****RYSTIGGO® (rozanolixizumab-noli)**

- Less than 50kg:** Administer 420 mg (3mL) subcutaneously via syringe pump up to 20mL/hr once weekly for 6 weeks for 1 treatment cycle.
- 50kg to less than 100 kg:** Administer 560 mg (4mL) subcutaneously via syringe pump once weekly up to 20mL/hr for 6 weeks for 1 treatment cycle.
- 100kg and above:** Administer 840mg (6mL) subcutaneously via syringe pump once weekly up to 20mL/hr for 6 weeks for 1 treatment cycle.

Repeat cycle after \_\_\_\_ days from the first dose of the previous treatment cycle. Refill x1 year.  
 (Subsequent cycles to be administered no sooner than 63 days from start of previous treatment cycle.)

Other: \_\_\_\_\_

Observe patient for 15 minutes after completion of infusion.

**Ancillary Orders****Anaphylaxis Kit**

If this is a 1<sup>st</sup> infusion dose, would you like Option Care Health to provide an anaphylaxis kit with the 1<sup>st</sup> dose?

- Yes  No

- Dosage:
- Epinephrine 0.3 mg (> 30 kg), 0.15 mg (15 to 30 kg), or 0.01 mg/kg (< 15 kg) SUBQ or IM x 1; repeat x 1 in 5 to 15 min PRN.
  - Diphenhydramine 25 mg (> 30 kg) or 1.25 mg/kg (≤ 30 kg) IV or IM; repeat x 1 in 15 min PRN no improvement.
  - 0.9% Sodium Chloride 500 mL (> 30 kg) or 250 mL (≤ 30 kg) IV at KVO rate PRN anaphylaxis.

Skilled Nursing to establish peripheral IV access as needed to manage anaphylaxis.

**Pre-Medication Orders:**

\_\_\_\_\_

**Lab Orders:**

\_\_\_\_\_

Skilled nurse to assess and administer via access device as indicated above. Nurse will provide ongoing support as needed. Refill above ancillary orders as directed x 1 year.

If patient is seen within a provider led infusion clinic, Option Care Health's infusion reaction management policy, skilled nursing plan of treatment, and IV flush administration will be followed per provider oversight. No individual anaphylaxis kit will be dispensed.

*I certify that the use of the indicated treatment is medically necessary and that I will be supervising the patient's treatment.*

Prescriber Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Prescriber Information**

<b>Prescriber Name:</b>	<b>Phone:</b>	<b>Fax:</b>
<b>Address:</b>	<b>NPI:</b>	
<b>City, State:</b>	<b>Zip:</b>	<b>Office Contact:</b>

**CONFIDENTIAL HEALTH INFORMATION:** Healthcare information is personal information related to a person's healthcare. It is being faxed to you after appropriate authorization or under circumstances that do not require authorization. You are obligated to maintain it in a safe, secure, and confidential manner. Re-disclosure of this information is prohibited unless permitted by law or appropriate customer/patient authorization is obtained. Unauthorized re-disclosure or failure to maintain confidentiality could subject you to penalties described in federal and state laws. **IMPORTANT WARNING:** This message is intended for the use of the person or entity to whom it is addressed and may contain information that is privileged and confidential, the disclosure of which is governed by applicable law. If the reader of this message is not the intended recipient, or the employee or agent responsible for delivering it to the intended recipient, you are hereby notified that any dissemination, distribution or copying of this information is STRICTLY PROHIBITED. If you have received this message in error, please notify us immediately. Brand names are the property of their respective owners.