

# UPLIZNA (INEBILIZUMAB-CDON) ORDER FORM

## PATIENT INFORMATION

Patient Name: \_\_\_\_\_ DOB: \_\_\_\_\_  
 Mobile Number: \_\_\_\_\_ Patient Weight: \_\_\_\_\_ kg  
 Allergies: \_\_\_\_\_  
 Patient has known difficult venous access. Comments: \_\_\_\_\_  
 New Start Therapy |  Continuation of Therapy & Date of last dose (if applicable): \_\_\_\_\_

## DIAGNOSIS (Provider must specify)

Neuromyelitis optica spectrum disorder (NMOSD) in adult patients who are anti-aquaporin-4 (AQP4) antibody positive, ICD 10: G36.0  
 Immunoglobulin G4-related disease (IgG4-RD) in adult patients, ICD 10: D89.84  
 Generalized myasthenia gravis (gMG) in adult patients who are antiacetylcholine receptor (AChR) or anti-muscle specific tyrosine kinase (MuSK) antibody positive, ICD 10: G70. \_\_\_\_\_  
 Other: \_\_\_\_\_

## PROVIDER INFORMATION

Provider Name (print name): \_\_\_\_\_ Provider NPI: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email Address: \_\_\_\_\_

**Prerequisites to treatment** – ensure the following information is complete and attached with referral:

- Demographics     Labs and tests supporting diagnosis     Office/progress notes

## PRE-MEDICATION

Recommendations per PI are selected, these will be given to patient unless otherwise specified.

Methylprednisolone (Solu-Medrol) 125mg IVP                       Benadryl 25mg PO                       Acetaminophen (Tylenol) 500mg PO  
 Famotidine 20mg IV                       Cetirizine (Zyrtec) 10mg PO  
 Other: \_\_\_\_\_ Dose: \_\_\_\_\_ Route: \_\_\_\_\_

## MEDICATION

MEDICATION	DOSE	ROUTE	FREQUENCY
Uplizna	300 mg	IV	<input type="checkbox"/> Initial: Weeks 0 and 2, then every 6 months (starting 6 months from first infusion) <input type="checkbox"/> Subsequent: Every 6 months

## LABS / SPECIAL INSTRUCTIONS

Order valid for 1 year from date of signature unless otherwise specified here: \_\_\_\_\_

**FAX NUMBERS:**

- CT: 203.433.0621     MA: 413.296.8482     NC: 919.984.8698     NY: 631.250.6020     SC: 864.973.6279  
 FL: 904.877.9270     MD: 240.224.8607     NH: 603.217.5371     OH: 937.871.4594     VA: 703.202.0499  
 ME: 207.407.7272     NJ: 201.581.4521     PA: 610.273.5998