

Tocilizumab (Actemra, Tofidence, Tyenne)

Fax to 505-420-4848 or Email to refer@optimuminfusion.com



PATIENT INFORMATION

Referral Status: New Referral Updated Order Order Renewal

Date: _____ Patient Name: _____ DOB: _____
ICD-10 code (required): _____ ICD-10 description: _____
 NKDA Allergies: _____ Weight (lbs/kg): _____ Height: _____
Patient Status: New to Therapy Continuing Therapy Last Treatment Date: _____ Next Due Date: _____

PROVIDER INFORMATION

Referral Coordinator Name: _____ Referral Coordinator Email: _____
Ordering Provider: _____ Provider NPI: _____
Referring Practice Name: _____ Phone: _____ Fax: _____
Practice Address: _____ City: _____ State: _____ Zip Code: _____

NURSING

- TB status & date (list results here & attach clinicals)

- Provide nursing care per Optimum Infusion Nursing Procedures, including reaction management and post-procedure observation

LABORATORY ORDERS

- CBC at each dose every _____
- CMP at each dose every _____
- CRP at each dose every _____
- Other: _____

PRE-MEDICATION ORDERS

- acetaminophen (Tylenol) 500mg / 650mg / 1000mg PO
- cetirizine (Zyrtec) 10mg PO
- loratadine (Claritin) 10mg PO
- diphenhydramine (Benadryl) 25mg / 50mg PO / IV
- methylprednisolone (Solu-Medrol) 40mg / 125mg IV
- hydrocortisone (Solu-Cortef) 100mg IV
- Other: _____
Dose: _____ Route: _____
Frequency: _____

THERAPY ADMINISTRATION

Tocilizumab (Actemra) or other tocilizumab product (as required by patient's health plan)

NOTE: Tocilizumab products include Actemra, Tofidence, and Tyenne

- Dose: 4mg/kg / 6mg/kg 8mg/kg / 10mg/kg / 12mg/kg
- Frequency: every 2 weeks / every 4 weeks / other: _____
- Route: intravenous
- Infuse over 1 hour
- Flush with 0.9% sodium chloride at infusion completion
- Doses exceeding 800mg per infusion are not recommended in RA patients
- Doses exceeding 600mg per infusion are not recommended in GCA patients
- Refills: Zero / for 12 months / _____ (if not indicated order will expire one year from date signed)

SPECIAL INSTRUCTIONS

Perform test for latent TB; if positive, start treatment for TB prior to starting tocilizumab. Monitor all patients for active TB during treatment, even if initial latent TB test is negative. It is recommended that tocilizumab not be initiated in patients with an absolute neutrophil count (ANC) below 2000 per mm³, platelet count below 100,000 per mm³, or who have ALT or AST above 1.5 times the upper limit of normal (ULN).

Laboratory monitoring—recommended due to potential consequences of treatment-related changes in neutrophils, platelets, lipids, and liver function tests.

Provider Name (Print)

Provider Signature

Date

SUBMIT ORDER FORM TO OPTIMUM INFUSION:

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