

**Provider Order Form**

**PATIENT INFORMATION**

Date:	Patient Name:	DOB:
ICD-10 code (required):	ICD-10 description:	
<input type="checkbox"/> NKDA Allergies:	Weight lbs/kg:	
<b>Patient Status:</b> <input type="checkbox"/> New to Therapy <input type="checkbox"/> Continuing Therapy		
Next Due Date (if applicable):		

**PROVIDER INFORMATION**

Ordering Provider:	Provider NPI:		
Referring Practice Name:	Phone:	Fax:	
Practice Address:	City:	State:	Zip Code:

**NURSING**

- Provide nursing care per IVX Standard Nursing Procedures, including reaction management and post-infusion observation
- Hepatitis B status & date (list results here & attach clinicals)  
\_\_\_\_\_
- TB status & date (list results here & attach clinicals)  
\_\_\_\_\_

**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
- Other: \_\_\_\_\_
- Dose: \_\_\_\_\_ Route: \_\_\_\_\_
- Frequency: \_\_\_\_\_

**THERAPY ADMINISTRATION**

- Please check preferred product(s):
- infliximab (Remicade)  infliximab-abda (Renflexis)
  - infliximab-dyyb (Inflectra)  infliximab-axxq (Avsola)
  - Mix in 250ml 0.9% sodium chloride, intravenous infusion over two hours (use in line filter 1.2 micron or less)
    - Dose:  3mg/kg  5mg/kg  7.5mg/kg  10mg/kg
    - Other: \_\_\_\_\_
    - Round up to nearest 100mg **OR**  Give exact dose
    - Frequency:  induction: week 0, 2, 6, and then every 8 weeks /  maintenance: every 8 weeks /  other: \_\_\_\_\_
    - Infusion rate: 10ml/hr x 15 min
      - Increase to: 20ml/hr x 15 min, 40ml/hr x 15 min, 80ml/hr x 15 min, 150ml/hr x 30 min, 250ml/hr until infusion complete
  - Flush with 0.9% sodium chloride at the completion of infusion
  - Patient is required to stay for 30-minute observation post infusion
  - Patient is NOT required to stay for observation time
  - 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 treatment. Monitor all patients for active TB during treatment, even if initial latent TB test is negative. \*Patients should be tested for HBV infection before initiating TNF blocker therapy, including REMICADE. For patients who test positive for hepatitis B surface antigen, consultation with a physician with expertise in the treatment of hepatitis B is recommended.

**Ordering Provider: Initial here \_\_\_\_\_ and proceed to the next page.**

## ADULT REACTION MANAGEMENT PROTOCOL

- Observe for **hypersensitivity reaction**: Fever, chills, rigors, pruritus, rash, cough, sneezing, throat irritation, nausea, vomiting
- If reaction occurs:
  - Stop infusion.
  - Maintain/establish vascular access.
  - Notify referring provider as clinically appropriate and follow clinical escalation protocol.
  - IVX Health clinicians have the following PRN medications available for the following reactions.
    - Headache, pain, fever > 100.4F, chills or rigors- Acetaminophen 650mg PO or Ibuprofen 400mg PO.
    - Mild Hives, itching, redness, or rash- Loratadine 10mg PO or Diphenhydramine 50mg PO.
    - Severe hives, itching, redness, or rash- Diphenhydramine 25-50mg SIVP.
    - Nausea, vomiting, heartburn, acid reflux- Ondansetron 4mg ODT (may repeat x 1 in 20 minutes if nausea continues, max dose 8mg) or Famotidine 20mg PO.
    - Severe Nausea, vomiting, heartburn, acid reflux- Ondansetron 4mg SIVP (may repeat x 1 in 20 minutes if nausea continues, max dose 8mg) or Famotidine 20mg SIVP.
    - Hypotension (90/60), vasovagal response- Place patient in reclined position, administer 0.9% Sodium Chloride IV 250ml. May repeat to keep BP >90/60, maximum of 1000ml, monitor vital signs.
    - Chest pain/discomfort, shortness of breath- Oxygen 2-15 liters, titrate to keep Spo2 >92%.
    - Solumedrol 125mg IV- Refractory to other treatments given.
    - Other \_\_\_\_\_
  - When symptoms resolve resume infusion at 50% previous rate and increase per manufactures guidelines.
- Severe allergic/anaphylactic reaction:**
  - If symptoms are rapidly progressing or continuing after administration of PRN medications above and signs symptoms of severe allergic/anaphylactic reaction (angioedema, swelling of the mouth, tongue, lips, or airway, dyspnea, bronchospasm with or without hypotension or hypertension.)
    - Call 911.
    - Initiate basic life support as needed.
    - Bring the **AED** to the patient (Attach pads if indicated).
    - **Epinephrine**- administer 0.3mg of a 1:1,000 (1mg/ml) concentration intramuscularly (preferably outer thigh), may be repeated every 5-15 minutes as needed to a maximum of 3 doses.
    - Place patient in recumbent position, elevate lower extremities.
    - **Oxygen**- administer 2-15 liters/minute or 100 percent oxygen as needed maintain SpO2 >92 percent.
    - **IV Fluids**- Treat hypotension with normal saline bolus of 500ml, repeat as needed to maintain systolic BP >90.
    - Administer **diphenhydramine** 50mg IV or Famotidine 20mg IVP, if not previously given.
    - Administer **methylprednisolone** 125mg IVP, if not previously given.
    - Continuous monitoring of blood pressure, pulse oximetry, and heart rate.
    - Notify clinical executive, DON or CMO, when appropriate. Must be done same day. Do not delay treatment.

\_\_\_\_\_  
**Patient Name**

\_\_\_\_\_  
**Patient Date of Birth**

\_\_\_\_\_  
**Provider Name (Print)**

\_\_\_\_\_  
**Provider Signature**

\_\_\_\_\_  
**Date**

**Email [ivxintake@ivxhealth.com](mailto:ivxintake@ivxhealth.com) or fax this form, insurance card (both sides), demographics, recent H&P, labs, and supporting clinicals to:**

**CHICAGO: 312-253-7244** \_\_\_Glenview \_\_\_Schaumburg \_\_\_Lombard \_\_\_Naperville

**TAMPA: 844-946-0849** \_\_\_Brandon \_\_\_Carrollwood \_\_\_Wesley Chapel

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