

PRESCRIPTION ORDER FORM

BENLYSTA (belimumab)



215 Pleasant Street, 5th Floor, Fall River, MA 02721
Phone: (508) 567-5666 | Fax: (508) 567-5614

PATIENT DEMOGRAPHICS

Form with fields for Patient Name, Date of Birth, Allergies, Weight, Patient's Phone Number, Address, City, State, Zip, and Patient's Email.

REQUIRED DOCUMENTATION

- Insurance Card, History & Physical, Patient Demographics, Most Recent Labs, Medication List, Tried/Failed Therapies, ANA or anti-dsDNA Labs

PRIMARY DIAGNOSIS

- M32.10 Systemic lupus erythematosus, organ or system involvement unspecified
M32.14 Glomerular disease in systemic lupus erythematosus
M32.19 Other organ or system involvement in systemic lupus erythematosus
M32.8 Other forms of systemic lupus erythematosus
M32.9 Systemic lupus erythematosus, unspecified
Other:

LAB ORDERS: PLEASE INCLUDE FREQUENCY

- CBC w/ diff & ANC, LFT's at month 2 then every 3 months after, Other:

PRE-MEDICATIONS (15 - 20 MINS BEFORE INFUSION)

- Diphenhydramine 25mg PO or IVP & 50mg PO or IVP, Cetirizine 10mg PO, Pepcid 20mg PO or IVP, Solu-Medrol 40mg IVP, Solu-Cortef 125mg IVP, Tylenol 650mg PO, Other:

PRIMARY MEDICATION ORDER

- Initial/Reload: Benlysta S.C 10mg/kg IV at weeks 0, 2, 4, then every 4 weeks thereafter
Maintenance: Benlysta S.C 10mg/kg IV every 4 weeks
Forsle: 200mg S.C weekly
Benlysta S.C fo Lupus 400mg 8 wk X 4 doses Then 200mg S.C weekly
Other:

Dose [ ] [ ] [x] Refill x12 months unless otherwise noted:

LINE USE/CARE ORDERS

- Start PIV/ACCESS CVC, Flush device per Suite Life Health's protocol, Other Flush Orders: Please fax other line care orders if checking this box

ADVERSE REACTION & ANAPHYLAXIS ORDERS

- Administer acute infusion reaction and anaphylaxis medications per Suite Life Health's protocol, Other: Please fax other reaction orders if checking this box

PROVIDER INFORMATION: PLEASE CHECK PREFERRED FORM OF COMMUNICATION

Form with fields for Provider Name, Address, City, State, Zip, NPI AND License, Office Contact, Phone, Fax, and Email.

Provider Signature

Date

