

## Stelara (Ustekinumab) Infusion/Injection Order

Patient Name: \_\_\_\_\_ DOB: \_\_\_\_\_  Male  Female

Diagnosis (please provide ICD10 code): \_\_\_\_\_

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

NKDA  Allergies: \_\_\_\_\_

New Therapy Order  Continuation of Therapy Date of last dose: \_\_\_\_\_

Ordering Provider Name: \_\_\_\_\_

Provider NPI: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Practice Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

### Pre-Medication:

- Acetaminophen \_\_\_\_\_ mg by  PO
- Cetirizine \_\_\_\_\_ mg by  PO
- Diphenhydramine \_\_\_\_\_ mg by  PO/  IVP
- Solu-Medrol \_\_\_\_\_ mg by  PO/  IVP
- Solu-Cortef \_\_\_\_\_ mg by  PO/  IVP
- Other: \_\_\_\_\_

### Required Documentation:

- Patient Demographics
- Patient Insurance (med and pharm card copies, front and back)
- Progress Notes/Labs supporting diagnosis
- Hepatitis B status and date
- CBC, CMP, Quantiferon, ESR, CRP lab results
- Most recent colonoscopy (within one year)
- Other: \_\_\_\_\_

### Stelara is a weight based drug:

Patient Height (cm): \_\_\_\_\_ Patient Weight (kg): \_\_\_\_\_

### Stelara Medication Order (Please Choose Applicable):

- Initial Induction Infusion:
  - Intravenous Dosage (choose one)
    - 260 mg (2 vials) (<55 kg)
    - 390 mg (3 vials) (55 kg - 85 kg)
    - 520 mg (4 vials) (>85 kg)
- Initial Induction Infusion followed by Maintenance Subcutaneous Injections:
  - 90 mg 8 weeks after infusion, and every 8 weeks thereafter
- Maintenance Subcutaneous Injections Only
  - 90 mg every 8 weeks

<b>Additional Instructions/Notes:</b>  	<b>Patient IV Access</b> <input type="checkbox"/> PIV <input type="checkbox"/> Use patient's SL/DL PICC, flush per protocol <input type="checkbox"/> Access/deaccess patient's Port, flush per protocol *Imaging results of proper placement required for PICC/Port
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### Ordering Provider:

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

Provider: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Best Contact Person in Office: \_\_\_\_\_ Phone: \_\_\_\_\_

**Locations:**  
 Skokie, IL: 4711 Golf Rd, Ste 900. P: 847-324-6800. F: 224-251-7141  
 Libertyville, IL: 1900 Hollister Dr, Ste 210. P: 847-324-6800. F: 224-251-7141  
 Houston, TX: 8303 SW Freeway, Ste 111. P: 346-738-9600. F: 346-613-8400