

Tyenne (Tocilizumab-aazg) 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
- CBC, CMP specifically including the following:
 - Absolute neutrophil count below 2000 per mm³
 - Platelet count below 100,000 per mm³
 - ALT or AST
- Other: _____

Tyenne may be a weight based drug:

Patient Height (cm): _____ Patient Weight (kg): _____

Tyenne Medication Order:

Rheumatoid Arthritis

- Intravenous Infusion Dosage for Adults
 - Induction: 4mg/kg every 4 weeks for _____ doses, followed by maintenance
 - Maintenance: 8mg/kg every 4 weeks
 - Other: _____
- Subcutaneous Dosage for Adults
 - Patients less than 100kg at the time of dosing, 162mg every 2 weeks
 - Patients more than 100kg at the time of dosing, 162mg every week
 - Other: _____

Polyarticular Juvenile Idiopathic Arthritis

- Intravenous Infusion Dosage for Pediatrics
 - Patients less than 30kg at the time of dosing, 10mg/kg every 4 weeks
 - Patients more than 30kg at the time of dosing, 8mg/kg every 4 weeks
 - Other: _____
- Subcutaneous Injection Dosage for Pediatrics
 - Patients less than 30kg at the time of dosing, 162mg every 3 weeks
 - Patients more than 30kg at the time of dosing, 162mg every 2 weeks
 - Other: _____

Giant Cell Arthritis

- Intravenous Infusion Dosage for Adults
 - 6mg/kg every 4 weeks, while tapering off glucocorticoids
 - Other: _____
- Subcutaneous Dosage for Adults
 - 162mg every 2 weeks, while tapering off glucocorticoids
 - 162mg every week, while tapering off glucocorticoids, based on clinical consideration
 - Other: _____

Systematic Juvenile Idiopathic Arthritis

- Intravenous Infusion Dosage for Pediatrics
 - Patients less than 30kg at the time of dosing, 12mg/kg every 2 weeks
 - Patients more than 30kg at the time of dosing, 8mg/kg every 2 weeks
 - Other: _____
- Subcutaneous Injection Dosage for Pediatrics
 - Patients less than 30kg at the time of dosing, 162mg every 2 weeks
 - Patients more than 30kg at the time of dosing, 162mg every week
 - Other: _____

Additional Instructions/Notes:

Patient IV Access

- PIV
- Use patient's SL/DL PICC, flush per protocol
- Access/deaccess patient's Port, flush per protocol
- *Imaging results of proper placement required for PICC/Port

Ordering Provider:

Signature: _____

Provider: _____

Best Contact Person in Office: _____

Date: _____

Phone: _____

Phone: _____

Fax: _____

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