ALLIED INFUSION SERVICES

Pemgarda (pemivibart) Order

Phone: 713-222-2364 or 1-888-538-0060
Fax: 832-698-3961

Patient Information

Name: _____
DOB: _____
Address: _____
City: _____ State: _____
Zip: _____ Weight: _____
Phone: _____
Allergies: _____

Prescriber Information

Prescriber Name: _____
NPI: _____
Address: _____
City: _____
State: _____ Zip: _____
Phone: _____

Diagnosis (please provide ICD-10 code in space provided):

_____ Pre-exposure prophylaxis of coronavirus disease 2019 (COVID-19) in adults and adolescents (12 years of age and older) who have moderate to severe immune compromise

_____ Other: _____

Nursing Orders: Hold infusion and notify provider for:

Signs/symptoms of illness or active infection, planned/recent surgical procedures, cough, night sweats, unintended weight loss, recent live vaccinations, active shingles.
If infusion related reaction occurs, stop infusion and follow Hypersensitivity Reaction Management Policy/Protocol as clinically indicated

Premedications:

☐ Tylenol 650mg PO ☐ Loratadine 10mg PO ☐ Benadryl 25mg IV or PO ☐ Solu-Medrol 40mg, 125mg or ____ mg
☐ Other: _____

Order valid for one year unless otherwise indicated. IV solutions and diluents may be substituted as allowed per manufacturer's instructions as necessitated by product availability.

PEMGARDA IV	☐ Initial Dose: 4500mg administered intravenously on day 0 and every 3 months thereafter ☐ Repeat Dose: 4500mg administered intravenously every 3 months ☐ Other: _____

Prescriber Name (Please print): _____
Prescriber Signature: _____ Date: _____

Please include a copy of the latest insurance information as well as all applicable clinical notes.
Email to: orders@alliedinfusion.com Fax to: 832-698-3961

By signing this form, you certify that the use of the selected treatment is medically necessary and you will be supervising the treatment of the patient. Additionally, you authorize Allied Infusion Services to act as your prior authorization designated agent when interacting with medical and prescription payors and patient assistance programs.