



Jupiter Infusion
 140 Jupiter Lakes Blvd, Suite A
 Jupiter, FL 33458
 Office: 561-277-9211

INTRAVENOUS IMMUNOGLOBULIN

REFERRAL STATUS: New Referral Dose or Frequency Change Order Renewal

PATIENT INFORMATION			
Date:	Patient Name:	DOB:	
<input type="checkbox"/> NKDA Allergies:	Weight (lbs / kg):	Height:	
Patient Status: <input type="checkbox"/> New to Therapy <input type="checkbox"/> Continuing Therapy – Last Treatment Date:		Next Due Date:	
PROVIDER INFORMATION			
Office Contact Name:		Office Email:	
Prescribing Providers Name:			
Office Address:		City:	State: Zip:
Office Phone Number:		Office Fax Number:	
DIAGNOSIS AND ICD 10 CODE			
<input type="checkbox"/> Diagnosis		ICD-10 Code:	
REQUIRED DOCUMENTATION/Testing			
<input type="checkbox"/> This signed order form by the provider		<input type="checkbox"/> Labs and Tests supporting primary diagnosis	
<input type="checkbox"/> Patient demographics AND insurance info			
<input type="checkbox"/> Clinical/Progress notes supporting primary dx			
PRE-MEDICATION ORDERS			
<input type="checkbox"/> acetaminophen (Tylenol) <input type="checkbox"/> 650mg / <input type="checkbox"/> 1000mg PO (prior to infusion) diphenhydramine <input type="checkbox"/> (Benadryl) <input type="checkbox"/> 25mg / <input type="checkbox"/> 50mg <input type="checkbox"/> PO / <input type="checkbox"/> IV (prior to infusion) methylprednisolone <input type="checkbox"/> (Solu-Medrol) 125 mg IV (prior to infusion) <input type="checkbox"/> other: _____			
MEDICATION ORDERS			
Jupiter Infusion will select the product based on payor requirements, product availability, and indication unless otherwise noted. <input type="checkbox"/> IVIG _____ gm/kg/day IV x _____ days <input type="checkbox"/> IVIG _____ gm/kg/day IV divided over _____ days <input type="checkbox"/> IVIG _____			
Refills*: <input type="checkbox"/> None <input type="checkbox"/> X6 months <input type="checkbox"/> X1 year <input type="checkbox"/> Other: _____			

Fax referral to (561) 277-9226

All information contained in this form is strictly confidential and will become part of the patient's medical record.