



ENTYVIO (VEDOLIZUMAB) INFUSION ORDERS

PATIENT INFORMATION

Demographics attached

Patient Name: _____ DOB: _____ Phone: _____

INSURANCE INFORMATION: PLEASE ATTACH COPY OF PRESCRIPTION/MEDICAL CARD(S), FRONT AND BACK

MEDICAL INFORMATION

J Code: J3380 Diagnosis: Crohn's Disease ICD-10 Code: _____
 Ulcerative Colitis ICD-10 Code: _____
 Other: _____ ICD-10 Code: _____

Patient Weight: _____ lbs

Allergies: _____

Clinical/Progress Notes, Labs, Tests supporting primary diagnosis attached

Date of last TB/CXR: _____ Copy of documentation attached

Labs: Required labs to be drawn by: Infusion Clinic Referring Physician

Lab Orders: _____

TB Protocol: Baseline testing: Quantiferon Gold (QFT Gold) or PPD. Yearly TB Screening (*Optional*)

Required Lab: Baseline Liver Enzymes (within 6 months, preferably)

ENTYVIO ORDERS

Entyvio Loading dose: 300mg IV at 0, 2, 6, then every 8 weeks
 Maintenance: 300mg IV every 8 weeks
 300mg every _____ weeks as another option

**Date of Last: Remicade Humira Stelara Other: _____ Dose: _____

Additional Orders/Comments:

PHYSICIAN INFORMATION

By signing this form and utilizing our services, you are authorizing Paragon Healthcare, Inc. and its employees to serve as your prior authorization and specialty pharmacy designated agent in dealing with medical and prescription insurance companies.

Physician Signature: _____ Date: _____

Physician Name: _____

Phone: _____ Fax: _____ Contact Person: _____

INFUSION CENTER LOCATION

<input type="checkbox"/> Arlington	<input type="checkbox"/> Austin	<input type="checkbox"/> Dallas	<input type="checkbox"/> Houston	<input type="checkbox"/> Knoxville	<input type="checkbox"/> North Hills	<input type="checkbox"/> Plano	<input type="checkbox"/> Round Rock	<input type="checkbox"/> San Antonio	<input type="checkbox"/> Stone Oak
P: 817.200.2530	P: 512.261.4800	P: 972.408.2777	P: 713.860.1755	P: 865-299-7525	P: 817.284.2700	P: 469-974-0565	P: 737-443-5230	P: 210.366.4358	P: 210.485.3700
F: 817.509.0011	F: 512.261.4803	F: 469.913.6894	F: 713.277.7219	F: 865-338-5604	F: 817.284.2701	F: 469-608-2072	F: 737-402-7698	F: 210.366.4896	F: 210.390.1738

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