

White Blood Cell Stimulators (Leukine®, Neupogen®, Neulasta®) Physician Request Form
Fax non-urgent requests to PerformRx Pharmacy Services at 866-533-5498 or urgent requests to 866-546-7972. Urgent requests should be reserved for those situations in which applying the standard procedure may seriously jeopardize the enrollee's life, health, or ability to regain maximum function. To speak to a representative, call 800-684-5502. Form must be completed for processing



A Medicare Prescription Drug Plan from AmeriHealth Mercy and Select Health

Patient Name: _____ Member ID#: _____
 Address: _____ Apt # or Suite #: _____
 City: _____ State: _____ Zip Code: _____
 Phone #: _____ Birth Date: _____
 Physician Name: _____ License #: _____ Physician Specialty: _____
 Address: _____ Apt # or Suite #: _____
 City: _____ State: _____ Zip Code: _____
 Contact Person: _____ Phone #: _____ Fax #: _____
 Physician Signature: _____

Deliver to Patient's Home Pick-up at Local Pharmacy (Name/Phone#): _____

Diagnosis: _____, Treatment of Neutropenia Provide: Absolute Neutrophil Count (ANC): _____ c/mm³ Date of Test: _____
Formula: ANC=WBCx(polys + bands)/100 Neutropenia = ANC < 1000 c/mm³ (Severe is < 500 c/mm³)

Start Date of therapy _____ Length of Therapy (No. of days of treatment): _____ OR on the following treatment dates: _____ Refills: _____

If the request for medication is for chemotherapy-induced neutropenia prophylaxis, does the patient have a 20% or higher chance of developing neutropenia or other neutropenic events, &/or has prior history of chemo induced neutropenia, which could compromise chemotherapy efficacy? Circle - YES NO

LEUKINE® REQUESTS - Body Surface Area (BSA) _____ M²

The recommended starting dose for the treatment of chemotherapy-induced neutropenia and most other indications is 250 mcg/m²/day. Do not administer earlier than 24 hours after administration of last dose of cytotoxic chemotherapy. Leukine® should be discontinued when ANC surpasses 1500 cells/mm³ for 3 consecutive days.

PLEASE CHECK THE PRESCRIPTION FOR LEUKINE® BASED ON 250 MCG/M ² /DAY			
Prescription Dose and Vial Dispensed for Calculated Body Surface Area	Calculated Body Surface Area (m ²)	Prescription Dose for calculated Body Surface Area	Calculated Body Surface Area (m ²)
<input type="checkbox"/> 250 mcg daily (give 1ml of 250 mcg/ml vial)	1.0	<input type="checkbox"/> 400 mcg daily (give 0.8 ml of 500 mcg/ml MDV)	1.6
<input type="checkbox"/> 300 mcg daily (give 0.6 ml of 500 mcg/ml MDV)	1.2	<input type="checkbox"/> 450 mcg daily (give 0.9 ml of 500 mcg/ml MDV)	1.8
<input type="checkbox"/> 350 mcg daily (give 0.7 ml 500 mcg/ml MDV)	1.4	<input type="checkbox"/> 500 mcg daily (give 1.0 ml of 500 mcg/ml MDV)	2.0
ALTERNATIVE 250 MCG/M ² /DAY FLAT DOSING FOR PATIENTS THAT WEIGH >40 KG, CHECK PRESCRIPTION ACCORDING TO PATIENT'S BSA			
Prescription Dose and Vial Dispensed for Calculated Body Surface Area	Calculated Body Surface Area (m ²)		
<input type="checkbox"/> 400 mcg daily (give 0.8 ml of 500 mcg/ml MDV)	< 1.8 m ²		
<input type="checkbox"/> 500 mcg daily (give 1.0 ml of 500 mcg MDV)	> 1.8 m ²		
Note: Leukine® available 250 mcg single use powder vials and 500 mcg multidose (MDV) vials. 250 mcg vials mixed with 1 ml of bacteriostatic water may store up to 20 days under refrigeration, 2-8°C (36-46°F) prior to use. If use 1 ml sterile water for injection to reconstitute, administer within 6 hours (used for neonates). 500 mcg MDV may be stored for up to 20 days under refrigeration, 2-8°C (36-46° F) after vial has been entered, or if drawn up in a syringe may be stored for up to 14 days under refrigeration, 2-8°C (36-46° F).			

Other Prescription Dose (i.e. patient BSA <1 m²): Dose: _____ mcg, Frequency: _____

Clinical response depends on chemotherapy regimen. **Comparison studies between Leukine® and Neupogen® had similar response rates to achieve ANC goal for the treatment of chemo-induced neutropenia:** Typically 3-4 days to reach ANC of 500 cells/mm³ and 6-7 days to reach 1000 cells/mm³ for 3 days. Consider stopping treatment once post-nadir ANC has reached target based on laboratory standards (i.e. 1000-1500 cells/mm³).

NEUPOGEN® REQUESTS - Patient's Weight: _____ Kg

The recommended starting dose for the treatment of chemotherapy-induced neutropenia is 5 mcg/kg/day. Neupogen® should be discontinued when ANC surpasses 10,000 cells/mm³ after expected chemotherapy-induced neutrophil nadir. For Peripheral blood progenitor cell collection the starting dose is 10 mcg/kg/day. Do not administer earlier than 24 hours after administration of last dose of cytotoxic chemotherapy.

If requesting Neupogen® please provide documentation of a medical reason for why the patient is unable to take Leukine® to treat their medical condition: _____

PLEASE CHECK THE PRESCRIPTION DOSE OF NEUPOGEN®	
Flat Dosing Based on Actual Body Weight	
Prescription Dose Of Medication	Patient Body Weight
<input type="checkbox"/> 300 mcg vial daily	< 75 kg
<input type="checkbox"/> 480 mcg vial daily	> 75 Kg
Indicate Exact Dose Calculated Based On Actual Body Weight BASED ON 5 MCG/KG/DAY or 10 MCG/KG/DAY	
<input type="checkbox"/> Daily Dose of Neupogen® _____ mcg	

Other Prescription Dose (i.e. 6mcg/kg for congenital neutropenia): Dose: _____ mcg, Frequency: _____

NEULASTA® REQUESTS Ordered Dose of Neulasta®: _____ mg; Sig: _____

The recommended starting dose for the treatment of chemotherapy-induced neutropenia is 6mg once per chemotherapy cycle. Dose modifications based on body weight only used in pediatric patients weighing less than 45 kg. Do not administer during the 14 days prior or 24 hours after administration of last dose of cytotoxic chemotherapy.

If requesting Neulasta®, please provide documentation of a medical reason for why the patient is unable to take both Leukine® and Neupogen® to treat their medical condition: If the medication request is for Neulasta® and is being ordered for a patient requiring dose dense chemotherapy for a documented diagnosis of breast cancer, the order has been prescribed by a physician at one of the following Cancer Centers: University of Louisville, Norton or Brown Cancer Center and the ordering physician has stipulated on the Neulasta® order the following: "Neulasta is Being Ordered in Conjunction with a Dose Dense Breast Cancer Regimen." _____