Transplant Referral Form

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Patient Information

☐ New Rx ☐ Refill

Name ____ Date of Birth ____ Home Phone Number ____ Other Phone Number ____

Address ____ City ____ State ____ Zip ____

Patient SS# ____ ☐ Allergies ____ ☐ No Known Allergies

Drug Delivery Info

Date Shipment Needed: ____ **Ship to:** ☐ Patient ☐ Clinic

Insurance Info [Fax a copy of the patient's insurance card (both sides.)]

Doctor/Prescriber Info [NPI # is mandatory.]

Name: ____ Office Contact : ____

Address: ____ City: ____ State: ____ Zip: ____

NPI # ____ Phone # ____ Fax # ____

Statement of Medical Necessity ** Please FAX recent clinical notes, tests, with the prescription to expedite the Prior Authorization.

Transplant Date: ____ Organ Transplanted: ____

Medication	Dose/Strength	Directions	Qty	Rfs
Tacrolimus	☐ 0.5mg ☐ 1mg ☐ 5mg			
Tacrolimus (Compounded Tacrolimus liquid)	☐ 0.5mg/1ml ☐ 1mg/1ml			
Rapamune® (Sirolimus)	☐ 0.5mg ☐ 1mg ☐ 2mg ☐ 1mg/ml			
Neoral® (Cyclosporine)	☐ 25mg ☐ 100mg ☐ 100mg/ml			
Myfortic® (Mycophenolic Acid)	☐ 180mg ☐ 360mg			
Cellcept ® (Mycophenolate)	☐ 200mg/ml ☐ 250mg ☐ 500mg			
Valcyte® (Valganciclovir)	☐ 450mg ☐ 50mg/ml			
Vfend® Voriconazole	☐ 50mg ☐ 200mg ☐ 40mg/ml			
Zortress® (everolimus)	☐ 0.25mg ☐ 0.5mg ☐ 0.75mg			
Azathioprine	☐			
Prednisone	☐			
Sandimune (Cyclosporine)	☐			

____
Doctor/Prescriber Signature

Federally approved, generic-equivalent medications will be dispensed for brand-name medications unless otherwise directed by the patient, physician, or health plan. IMPORTANT CONFIDENTIALLY NOTICE: This and any documents accompanying this transmission may contain confidential health information that is legally privileged. This information is intended only for the use of the individual or entity name above. He authorized recipient of this information is prohibited from disclosing this information to any other party unless required to do so by law or regulation. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution, or action taken in reliance on the content of these documents is strictly prohibited. If you have received this information in error, please notify the sender immediately and arrange for the return or destruction of these documents.

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