# VYVGART Hytrulo®

(efgartigimod alfa and hyaluronidase-qvfc)

Advanced Infusion Care Centers®

## PATIENT DEMOGRAPHIC INFORMATION

Patient Name: _____ Phone: _____

Date of Birth: _____ Address: _____

Allergies ☐ See List ☐ NKDA City, State, Zip: _____

Weight: _____ ☐ kg ☐ lbs Height: _____ ☐ in ☐ cm Email: _____

## PRIMARY DIAGNOSIS

☐ Chronic inflammatory demyelinating polyneuritis (G61.81)

☐ Myasthenia gravis without (acute) exacerbation (gMG) (G70.00)

☐ Myasthenia gravis with (acute) exacerbation (gMG) (G70.01)

☐ Other: _____

## PRESCRIPTION

**Myasthenia Gravis**

☐ VYVGART Hytrulo 1,008 mg/11,200 units subcutaneous injection once weekly for 4 weeks.

Thereafter, interval between infusion cycles: ____ weeks (1–4)

**Total number of 4-week treatment cycles authorized (up to 12): _____**

**CIDP**

☐ VYVGART Hytrulo 1,008 mg/11,200 units SubQ injection once weekly

☐ Other: _____

Has patient received any doses of this medication in the past? ☐ Yes ☐ No

☑ Refill x 12 months unless otherwise noted: _____

## REQUIRED DOCUMENTATION

- Insurance card
- H&P
- Patient demographics
- Medication list
- Most recent labs
- Tried and failed therapies (including duration)
- EMG confirming MG
- MG-ADL assessment

## ANCILLARY ORDERS

### ADVERSE REACTION & ANAPHYLAXIS ORDERS

☑ Administer acute infusion and anaphylaxis medications per Advanced Infusion Care Centers' protocol *(See aiscaregroup.com for detailed policy)*

☐ Other: Please fax other adverse reaction orders if checking this box

### PRE-MEDICATION ORDERS PROTOCOL

☐ Per infusion center protocol: No recommended standard pre-meds for Vyvgart Hytrulo

☐ Provider Prescribed: _____

### LAB ORDERS—PLEASE INCLUDE FREQUENCY

☐ Please list any labs to be drawn by the infusion clinic: _____

## PRESCRIBER INFORMATION

Prescriber Name: _____ Phone: _____

NPI: _____ Fax: _____

Office Contact Person: _____ Email: _____

Prescriber Signature: _____ Date: _____

*I certify that the use of the indicated treatment is medically necessary, and I will be supervising the patient's treatment.*



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