

Phone: (517) 212-4336 | Fax: (877) 249-1191 hillsdalehospital.com/infusion

STAT REFERRAL
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## **LEQVIO ORDER FORM**

Last Nam	e:	F	First Name: MI_			DOB:
HT:	in WT:kg Sex: 🗖 Make	Female Allergie	es: NKDA,			
-					Contact Phone #	
NPI #:		Tax ID#:	Tax ID#:		Fax #:	
STATEM	ENT OF MEDICAL NECESSITY					
Primary [	Diagnosis: (ICD 10 CODE + DESCRIPTION)		Secondary D	iagnosis: (ICD 10 CODE +	DESCRIPTION)	
PRESCR	ent have venous access?   YES  IPTION ORDERS  ALL MEDIPORTS / IV ACCESSES WILL I	•				-
a) b)	ALL PRODUCTS WILL BE PREPARED A				ran	
ECT	MEDICATION	DOSE	ROUTE		REQUENCY	DURATION
	LEQVIO (LOADING DOSES)	284 mg	SQ		3, then every 6 months	
]	LEQVIO (MAINTENANCE DOSES)	284 mg	SQ	Eve	ery 6 months	
LABS						
.ECT	LAB REQUESTED	FREQUENCY				
]						
<del>-</del>						
euppon	TING DOCUMENTATION FOR DATIFNITS F	DECEMBIC LEOVIO				
SUPPOR 1) 2) 3)	TING DOCUMENTATION FOR PATIENTS IS SUPPORTING CLINICAL NOTES TO INCLUDE HETEROZYGOUS FAMILIAL HYPERCHOLES PLEASE MARK ANY OF THE FOLLOWING CF PRESENCE OF TENDON XA FAMILY HISTORY OF MI AT FAMILY HISTORY OF TOTAL ARCUS CORNEALIS BEFOR	E ANY PAST TRIED AND/O TEROLEMIA (HEFH) - DOI RITERIA THE HEFH PATIE NTHOMA(S) IN THE PATIE <60 YEARS OLD IN 1ST D . CHOLESTEROL > THAN	ES THE PATIENT HAVE ENT MEETS: ENT OR 1ST/2ND DEGR DEGREE RELATIVE OR	A UNTREATED LDL ≥ 190M EE RELATIVE <50 YEARS OLD IN 2 <sup>ND</sup> DEG	MG/DL (≥ 155MG/DL IF <16 YEARS OF AC	
1) 2)	SUPPORTING CLINICAL NOTES TO INCLUDE HETEROZYGOUS FAMILIAL HYPERCHOLES  PLEASE MARK ANY OF THE FOLLOWING CF  PRESENCE OF TENDON XA  FAMILY HISTORY OF MI AT  FAMILY HISTORY OF TOTAL	E ANY PAST TRIED AND/O TEROLEMIA (HEFH) - DOI RITERIA THE HEFH PATIE NTHOMA(S) IN THE PATIE <60 YEARS OLD IN 1ST D . CHOLESTEROL > THAN IE AGE 45	ES THE PATIENT HAVE ENT MEETS: ENT OR 1ST/2ND DEGF DEGREE RELATIVE OR I 290MG/DL IN A 1ST/2N	A UNTREATED LDL ≥ 190M EE RELATIVE <50 YEARS OLD IN 2 <sup>ND</sup> DEG ID DEGREE RELATIVE	MG/DL (≥ 155MG/DL IF <16 YEARS OF AC	
1) 2) 3)	SUPPORTING CLINICAL NOTES TO INCLUDE HETEROZYGOUS FAMILIAL HYPERCHOLES  PLEASE MARK ANY OF THE FOLLOWING CF  PRESENCE OF TENDON XA  FAMILY HISTORY OF MI AT  FAMILY HISTORY OF TOTAL  ARCUS CORNEALIS BEFOR	E ANY PAST TRIED AND/O TEROLEMIA (HEFH) - DOI RITERIA THE HEFH PATIE NTHOMA(S) IN THE PATIE <60 YEARS OLD IN 1ST D CHOLESTEROL > THAN E AGE 45  ≥ 100MG/DL DESPITE TR	ES THE PATIENT HAVE ENT MEETS: ENT OR 1ST/2ND DEGF DEGREE RELATIVE OR I 290MG/DL IN A 1ST/2N	EE RELATIVE  <50 YEARS OLD IN 2 <sup>ND</sup> DEG  ID DEGREE RELATIVE  H-INTENSITY STATIN?	MG/DL (≥ 155MG/DL IF <16 YEARS OF AC	
1) 2) 3)	SUPPORTING CLINICAL NOTES TO INCLUDE HETEROZYGOUS FAMILIAL HYPERCHOLES' PLEASE MARK ANY OF THE FOLLOWING CF PRESENCE OF TENDON XA FAMILY HISTORY OF MI AT FAMILY HISTORY OF TOTAL ARCUS CORNEALIS BEFOR	E ANY PAST TRIED AND/O TEROLEMIA (HEFH) - DOI RITERIA THE HEFH PATIE NTHOMA(S) IN THE PATIE <60 YEARS OLD IN 1ST D . CHOLESTEROL > THAN IE AGE 45 ≥ 100MG/DL DESPITE TR	ES THE PATIENT HAVE ENT MEETS: ENT OR 1ST/2ND DEGF DEGREE RELATIVE OR 1 290MG/DL IN A 1ST/2N REATMENT WITH A HIG	EE RELATIVE  <50 YEARS OLD IN 2 <sup>ND</sup> DEG  ID DEGREE RELATIVE  H-INTENSITY STATIN? □  S □ NO	MG/DL (≥ 155MG/DL IF <16 YEARS OF AC	
1) 2) 3) 4) 5)	SUPPORTING CLINICAL NOTES TO INCLUDE HETEROZYGOUS FAMILIAL HYPERCHOLES:  PLEASE MARK ANY OF THE FOLLOWING CF  PRESENCE OF TENDON XA  FAMILY HISTORY OF MI AT  FAMILY HISTORY OF TOTAL  ARCUS CORNEALIS BEFOR  ASCVD - DOES THE PATIENT'S LDL REMAIN  HAS THE PATIENT TRIED AND FAILED PCSK	E ANY PAST TRIED AND/O TEROLEMIA (HEFH) - DOI RITERIA THE HEFH PATIE NTHOMA(S) IN THE PATIE <60 YEARS OLD IN 1ST D . CHOLESTEROL > THAN IE AGE 45 ≥ 100MG/DL DESPITE TR G9 INHIBITOR AFTER 12 V SH INTENSITY STATIN FO IAS: OME TERIAL REVASCULARIZA	ES THE PATIENT HAVE ENT MEETS: ENT OR 1ST/2ND DEGR DEGREE RELATIVE OR 1 290MG/DL IN A 1ST/2N REATMENT WITH A HIG VEEKS OF USE?  YE R ≥ 8 CONTINUOUS W	EE RELATIVE  <50 YEARS OLD IN 2 <sup>ND</sup> DEG  ID DEGREE RELATIVE  H-INTENSITY STATIN?   S □ NO  EEKS? □ YES □ NO  □ HISTORY OF	MG/DL (≥ 155MG/DL IF <16 YEARS OF AC	
1) 2) 3) 4) 5) 6)	SUPPORTING CLINICAL NOTES TO INCLUDE HETEROZYGOUS FAMILIAL HYPERCHOLES:  PLEASE MARK ANY OF THE FOLLOWING CF  PRESENCE OF TENDON XA  FAMILY HISTORY OF MI AT  ARCUS CORNEALIS BEFORE  ASCVD - DOES THE PATIENT'S LDL REMAIN HAS THE PATIENT TRIED AND FAILED PCSM HAS THE PATIENT TRIED AND FAILED A HIGH INDICATE ANY CONDITIONS THE PATIENT H  ACUTE CORONARY SYNDR  CORONARY OR OTHER ART	E ANY PAST TRIED AND/O TEROLEMIA (HEFH) - DOI RITERIA THE HEFH PATIE NTHOMA(S) IN THE PATIE <60 YEARS OLD IN 1ST D CHOLESTEROL > THAN E AGE 45  100MG/DL DESPITE TR SH INTENSITY STATIN FO IAS: OME TERIAL REVASCULARIZA SEASE PRESUMED TO BE SUPPORT DIAGNOSIS	ES THE PATIENT HAVE ENT MEETS: ENT OR 1ST/2ND DEGR DEGREE RELATIVE OR 1 290MG/DL IN A 1ST/2N REATMENT WITH A HIG NEEKS OF USE?  YE R ≥ 8 CONTINUOUS W ATION E OF ATHEROSCLERO	EE RELATIVE  <50 YEARS OLD IN 2 <sup>ND</sup> DEG  ID DEGREE RELATIVE  H-INTENSITY STATIN?   S □ NO  EEKS? □ YES □ NO  □ HISTORY OF	MG/DL (≥ 155MG/DL IF <16 YEARS OF AC REEE RELATIVE YES □ NO	
1) 2) 3) 4) 5) 6) 7)	SUPPORTING CLINICAL NOTES TO INCLUDE  HETEROZYGOUS FAMILIAL HYPERCHOLES:  PLEASE MARK ANY OF THE FOLLOWING CF  PRESENCE OF TENDON XA  FAMILY HISTORY OF MI AT  ARCUS CORNEALIS BEFORE  ASCVD - DOES THE PATIENT'S LDL REMAIN  HAS THE PATIENT TRIED AND FAILED PCSM  INDICATE ANY CONDITIONS THE PATIENT H  ACUTE CORONARY SYNDR  CORONARY OR OTHER ART  PERIPHERAL ARTERIAL DIS  INCLUDE LABS AND/OR TEST RESULTS TO  LDL-C (Required)	E ANY PAST TRIED AND/O TEROLEMIA (HEFH) - DOI RITERIA THE HEFH PATIE NTHOMA(S) IN THE PATIE <60 YEARS OLD IN 1ST D CHOLESTEROL > THAN IE AGE 45  ≥ 100MG/DL DESPITE TR IS INHIBITOR AFTER 12 W SH INTENSITY STATIN FO IAS: OME TERIAL REVASCULARIZA SEASE PRESUMED TO BE SUPPORT DIAGNOSIS IR PCSK9 GENE (If Applic	ES THE PATIENT HAVE ENT MEETS: ENT OR 1ST/2ND DEGR DEGREE RELATIVE OR 1 290MG/DL IN A 1ST/2N REATMENT WITH A HIG EVEKS OF USE? YE FOR 2 8 CONTINUOUS W ATION E OF ATHEROSCLERO' Cable)	EE RELATIVE  <50 YEARS OLD IN 2 <sup>ND</sup> DEG  ID DEGREE RELATIVE  H-INTENSITY STATIN?   S □ NO  EEKS? □ YES □ NO  □ HISTORY OI □ TRANSIENT  TIC ORIGIN □ STROKE	MG/DL (≥ 155MG/DL IF <16 YEARS OF AC SEREE RELATIVE YES □ NO F MYOCARDIAL INFARCTION T ISCHEMIC ATTACK	
1) 2) 3) 4) 5) 6) 7) 8) Physicia	SUPPORTING CLINICAL NOTES TO INCLUDE  HETEROZYGOUS FAMILIAL HYPERCHOLES  PLEASE MARK ANY OF THE FOLLOWING CF  PRESENCE OF TENDON XA  FAMILY HISTORY OF MI AT  ARCUS CORNEALIS BEFORE  ASCVD - DOES THE PATIENT'S LDL REMAIN  HAS THE PATIENT TRIED AND FAILED PCSH  HAS THE PATIENT TRIED AND FAILED A HIGH  INDICATE ANY CONDITIONS THE PATIENT H  ACUTE CORONARY SYNDR  CORONARY OR OTHER ART  PERIPHERAL ARTERIAL DIS  INCLUDE LABS AND/OR TEST RESULTS TO  LDL-C (Required)  MUTATION IN LDL, APOB, O	E ANY PAST TRIED AND/O TEROLEMIA (HEFH) - DOI RITERIA THE HEFH PATIE NTHOMA(S) IN THE PATIE <60 YEARS OLD IN 1ST D . CHOLESTEROL > THAN IE AGE 45 ≥ 100MG/DL DESPITE TF G9 INHIBITOR AFTER 12 V SCH INTENSITY STATIN FO IAS: OME TERIAL REVASCULARIZA SEASE PRESUMED TO BE SUPPORT DIAGNOSIS IR PCSK9 GENE (If Applic	ES THE PATIENT HAVE ENT MEETS: ENT OR 1ST/2ND DEGR DEGREE RELATIVE OR 1 290MG/DL IN A 1ST/2N REATMENT WITH A HIG NEEKS OF USE?  YE RE 8 CONTINUOUS W ATION E OF ATHEROSCLERO	EE RELATIVE  <50 YEARS OLD IN 2 <sup>ND</sup> DEG  ID DEGREE RELATIVE  H-INTENSITY STATIN?   SS □ NO  EEKS? □ YES □ NO  □ HISTORY OI □ TRANSIENT  TIC ORIGIN □ STROKE	MG/DL (≥ 155MG/DL IF <16 YEARS OF AC	SE)? YES INO
1) 2) 3) 4) 5) 6) 7) 8) Physicia *Signatur	SUPPORTING CLINICAL NOTES TO INCLUDE  HETEROZYGOUS FAMILIAL HYPERCHOLES  PLEASE MARK ANY OF THE FOLLOWING CF  PRESENCE OF TENDON XA  FAMILY HISTORY OF MI AT  ARCUS CORNEALIS BEFORE  ASCVD - DOES THE PATIENT'S LDL REMAIN  HAS THE PATIENT TRIED AND FAILED PCSM  HAS THE PATIENT TRIED AND FAILED A HIGH  INDICATE ANY CONDITIONS THE PATIENT HE  ACUTE CORONARY SYNDR  CORONARY OR OTHER ART  PERIPHERAL ARTERIAL DIS  INCLUDE LABS AND/OR TEST RESULTS TO  LDL-C (Required)  MUTATION IN LDL, APOB, OF COTHER MEDICAL NECESSITY:  "S Signature"	E ANY PAST TRIED AND/O TEROLEMIA (HEFH) - DOI RITERIA THE HEFH PATIE NTHOMA(S) IN THE PATIE <60 YEARS OLD IN 1ST D . CHOLESTEROL > THAN IE AGE 45  ≥ 100MG/DL DESPITE TR G9 INHIBITOR AFTER 12 W SH INTENSITY STATIN FO IAS: OME TERIAL REVASCULARIZA SEASE PRESUMED TO BE SUPPORT DIAGNOSIS IR PCSK9 GENE (If Applic	ES THE PATIENT HAVE ENT MEETS: ENT OR 1ST/2ND DEGR DEGREE RELATIVE OR I 290MG/DL IN A 1ST/2N REATMENT WITH A HIG NEEKS OF USE? YE R ≥ 8 CONTINUOUS W ATION E OF ATHEROSCLERO	EE RELATIVE  <50 YEARS OLD IN 2 <sup>ND</sup> DEG  ID DEGREE RELATIVE  H-INTENSITY STATIN? □  S □ NO  □ HISTORY OI □ TRANSIENT  TIC ORIGIN □ STROKE	MG/DL (≥ 155MG/DL IF <16 YEARS OF ACTION F MYOCARDIAL INFARCTION FISCHEMIC ATTACK  Date	SE)? TYES INO