

**Phone: 1-800-809-1265 Fax: 1-866-872-8920**

MRN: \_\_\_\_\_

DOB: \_\_\_\_\_

## STANDARD XGEVA® (denosumab) PLAN OF TREATMENT

**NOTE:** Patient ***may be ineligible*** to receive Xgeva® if serum calcium levels are sub-therapeutic, receiving antibiotics for active infectious process, antifungal therapy, active fever and/or suspected infection. Treat hypocalcemia, hypovitaminosis D, and other disturbance of bone and mineral metabolism before starting therapy.

**1. Patient Name:** \_\_\_\_\_ Height (inches): \_\_\_\_\_ Weight (lbs): \_\_\_\_\_

**2. Allergies:** \_\_\_\_\_

**3. Diagnosis:** \* Please complete the 2<sup>nd</sup> and 3<sup>rd</sup> digits to complete the ICD-10 code for billing

- C79.\_\_\_\_ Secondary malignant neoplasm of \_\_\_\_\_
- C90.\_\_\_\_ Multiple myeloma
- D48.0 Neoplasm of uncertain behavior of bone and articular cartilage     E83.52 Hypercalcemia
- Other ICD-10 Code: \_\_\_\_\_ Diagnosis description: \_\_\_\_\_

*CONFIDENTIAL Property of Palmetto Infusion / CONFIDENTIAL Property of Palmetto Infusion / CONFIDENTIAL Property of Palmetto Infusion*

**4. History:** Is the patient on Calcium and Vitamin D replacement?  Yes  No

### 5. Orders:

- XGEVA® (denosumab) 120 mg subcutaneously every 4 weeks.
- XGEVA® (denosumab) 120 mg subcutaneously every 4 weeks with additional 120 mg doses on Days 8 and 15 of the first month of therapy.

*(Administer as subcutaneous injection only to upper arm, upper thigh, or abdomen)*

**Clinical Lab Monitoring:** Serum Calcium level to be monitored by ordering physician; hold dosing if serum Calcium is sub-therapeutic.

Special orders: \_\_\_\_\_

***If adverse drug reaction occurs, utilize the ADVERSE DRUG REACTION GUIDELINES***

**6. Physician's Signature:** \_\_\_\_\_ / \_\_\_\_\_ Date: \_\_\_\_\_  
No Stamp Signatures (Dispense as written) (Substitution permitted)

Printed Physician's Name with Credentials: \_\_\_\_\_ NPI: \_\_\_\_\_

### **7. Fax updated supporting clinical MD notes with each order renewal or change in orders**

*Infusion order forms and Adverse Drug Reaction Guidelines are available at [www.palmettoinfusion.com](http://www.palmettoinfusion.com)*



MRN: \_\_\_\_\_

Phone: 1-800-809-1265 Fax: 1-866-872-8920

DOB: \_\_\_\_\_

### Guidelines for Prescribing Xgeva® (denosumab)

(Required documentation with all initial referrals)

Patient Name: \_\_\_\_\_

Referral Date: \_\_\_\_\_

\_\_\_ Include signed and completed **Plan of Treatment**. (MD must complete sections 1-7)  
(Infusion order forms & Standard Adverse Reactions orders are available at [www.palmettoinfusion.com](http://www.palmettoinfusion.com) under Agency/MD tab)

\_\_\_ Include patient demographic information and insurance information. (Copy of insurance cards if available)

\_\_\_ **Supporting clinical MD notes to include any past tried and/or failed therapies, intolerance, outcomes or contraindications to conventional therapy. Include any lab results and/or tests to support diagnosis.**

- Xgeva® is indicated for the prevention of skeletal-related events in patients with multiple myeloma and in patients with bone metastases from solid tumors, treatment of adults and skeletally mature adolescents with giant cell tumor of bone that is unresectable or where surgical resection is likely to result in severe morbidity, and treatment of hypercalcemia of malignancy refractory to bisphosphonate therapy.

\_\_\_ If patient is switching bisphosphonate therapies, then MD must specify wash-out period prior to starting Xgeva® as specified of \_\_\_\_\_ weeks. Last known therapy: \_\_\_\_\_ and last date received: \_\_\_\_\_.

\_\_\_ Other as requested: \_\_\_\_\_

#### Pre-Screening:

\_\_\_ Serum Calcium level required within last 30 days

\_\_\_ Pregnancy screening (Females of reproductive potential should be advised to use effective contraception during therapy, and for at least 5 months after the last dose)

**\*\* Warnings/Precautions:** •Patients receiving Xgeva should not take Prolia®. (5.1) •Hypersensitivity reactions including anaphylaxis may occur. Discontinue permanently if a clinically significant reaction occurs. (5.2) •Hypocalcemia: Xgeva can cause severe symptomatic hypocalcemia, and fatal cases have been reported. Correct hypocalcemia prior to initiating Xgeva. Monitor calcium levels during therapy, especially in the first weeks of initiating therapy, and adequately supplement all patients with calcium and vitamin D. (5.3) •Osteonecrosis of the jaw (ONJ) has been reported in patients receiving Xgeva. Perform an oral examination prior to starting Xgeva. Monitor for symptoms. Avoid invasive dental procedures during treatment with Xgeva. (5.4) •Atypical femoral fracture: Evaluate patients with thigh or groin pain to rule out a femoral fracture. (5.5) •Hypercalcemia Following Treatment Discontinuation in Patients with Giant Cell Tumor of Bone and in Patients with Growing Skeletons: Monitor patients for signs and symptoms of hypercalcemia and manage as clinically appropriate. (5.6, 8.4) • Multiple Vertebral Fractures (MVF) Following Treatment Discontinuation: When Xgeva treatment is discontinued, evaluate the individual patient’s risk for vertebral fractures. (5.7) • Embryo-Fetal Toxicity: Can cause fetal harm. Advise females of reproductive potential of potential risk to the fetus and to use effective contraception.(5.8, 8.1, 8.3) See full prescribing information.

Palmetto Infusion Services will complete insurance verification and submit all required clinical documentation to the patient’s insurance company for eligibility. Our office will notify you if any further information is required. We will review financial responsibility with the patient and refer them to any available Co-pay assistance as required. Thank you for the referral.

**Please fax all information to 1-866-872-8920 or call 1-800-809-1265 for assistance.**