



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

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

## Guidelines for Prescribing Givlaari® (givosiran)

(Required documentation with all initial referrals)

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

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

- \_\_\_ Include signed and completed **Plan of Treatment**.
  
- \_\_\_ 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.**
  
- \_\_\_ Baseline Liver Function Tests
  
- \_\_\_ Suggested baseline serum creatinine levels and estimated glomerular filtration rate
  
- \_\_\_ Other as requested:  
\_\_\_\_\_  
\_\_\_\_\_

----- WARNINGS AND PRECAUTIONS -----

- Anaphylactic Reaction: Ensure that medical support is available to appropriately manage anaphylactic reactions when administering GIVLAARI. Monitor for signs and symptoms. If anaphylaxis occurs, discontinue GIVLAARI and administer appropriate medical treatment. (5.1) • Hepatic Toxicity: Measure liver function at baseline and periodically during treatment with GIVLAARI. Interrupt or discontinue treatment with GIVLAARI for severe or clinically significant transaminase elevations. (2.1, 5.2) • Renal Toxicity: Monitor renal function during treatment with GIVLAARI as clinically indicated. (5.3) • Injection Site Reactions: May occur, including recall reactions. Monitor for reactions and manage clinically as needed. (5.4)

*See full prescribing information.*



### Checklist for referrals to AccuRX Infusion Center:

Fax referral to 1-866-990-3192

- Patient demographics – address, phone number, SS#, etc.
- Insurance Information – copy of the card(s) if possible
- Plan of Treatment/Orders
- Most recent physician office notes to include tried and failed therapies – all insurance companies that require a pre-authorization require the note. This includes Medicare/Medicaid HMOs
- Any lab results or other diagnostic procedures to support the diagnosis

AccuRx Infusion Center 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.