arise infusion
THERAPY SERVICES
A DIVISION OF ARTHRITIS AND RHEUMATISM ASSOCIATES, PC

Fax To: 301-424-3590
Have a Question? Call: 240-514-5000

IVIG (Immunoglobulin) ORDER FORM

REFERRAL TYPE

☐ New Referral ☐ Order Renewal ☐ Restart ☐ Frequency Change ☐ Dosage Change

PREFERRED LOCATION

☐ 2730 University Blvd. West | Suite 714 Wheaton, MD 20902	☐ 14995 Shady Grove Road | Suite 250 Rockville, MD 20850	☐ 5454 Wisconsin Avenue | Suite 600 Chevy Chase, MD 20815
☐ 18111 Prince Philip Drive | Suite 323 Olney, MD 20832	☐ 71 Thomas Johnson Drive Frederick, MD 21702	☐ 2021 K Street, NW | Suite 300 Washington, DC 20006
	☐ 8270 Willow Oaks Corporate Drive | Suite 150 Fairfax, VA 22031	

PATIENT INFORMATION

Name:	DOB:	Email:
Address:	Weight: KG LBS	Phone:

REFERRING PHYSICIAN INFORMATION

Name:	NPI:	
Office Contact Name:	Phone:	Fax:
Address:		

IVIG ORDER

Dosing/Frequency:

Diagnosis:

- ☐ D69.3—Immune thrombocytopenic purpura
- ☐ D80.1—Nonfamilial hypogammaglobulinemia
- ☐ D83.0—Common variable immunodeficiency with predominant abnormalities of B-cell numbers and function
- ☐ G61.0—Guillain-Barre syndrome
- ☐ G61.81—Chronic inflammatory demyelinating polyneuritis
- ☐ G61.89—Other inflammatory polyneuropathies
- ☐ G70.00—Myasthenia gravis w/o (acute) exacerbation
- ☐ G73.7—Myopathy in diseases classified elsewhere
- ☐ M33.12—Other dermatomyositis with myopathy
- ☐ M33.19—Other dermatomyositis with other organ involvement
- ☐ M33.22—Polymyositis with myopathy

☐ Other Diagnosis: ICD-10 Code (Required):

Special Instructions:

Physicians Signature:	Date: ***(Order is Valid for One Year)***

REQUIRED DOCUMENTATION

Please fax the following documents and records:

- Patient Demographics
- Two most recent office notes (Supporting the DX and treatment ordered)
- Most recent labs that include values for:
  - CMP
  - IgA, IgG, IgM
- Copy of the patient's insurance card(s) – front and back
- Medication History
- For continuation of treatment, include the last infusion note

We will contact the patient and schedule their treatment once our benefit investigation and any prior authorizations have been completed.