



EVUSHELD

Tixagevimab co-packaged with cilgavimab

6955 Foothill Blvd, Suite 67A, Oakland, CA, 94605

Phone: (510) 878-9528 | Fax: (510) 969-5840 | Email: referrals@totalinfusion.com

Name: _____

DOB: _____ Phone: _____

Gender: Male Female

Allergies: _____

Weight: _____

DIAGNOSIS (ICD-10 code required):

- Z28.04 Immunization not carried out because of patient allergy to vaccine or component
- D84.9 Immunodeficiency, unspecified
- _____ Other: _____

PROVIDER REMINDERS:

- All orders with a will be placed unless otherwise noted
- EVUSHELD is NOT authorized for treatment of COVID-19, or for post-exposure prophylaxis
- Consider the risks and benefits prior to initiating EVUSHELD in individuals at high risk for cardiovascular events
- Patient must be at least 12 years of age and 40kg (88 pounds)
- Follow Up Care is the responsibility of the prescriber

Hold EVUSHELD if:

- Temperature **GREATER THAN** 100 degrees F
- Complains of symptoms of acute viral or bacterial illness
- Severe hypersensitivity reaction to EVUSHELD

Nursing Considerations:

- Clinically monitor individuals after injections and observe for at least 1 hour

Premedications

No routine premedications necessary.

Medications

Inject EVUSHELD (Tixagevimab 300mg and Cilgavimab 300mg), IM, Once.

Administer the two components of EVUSHELD consecutively, at different sites, preferably one in each of the gluteal muscles.

Please Note: This order is good for one dose. The recommended timing for repeat dosing is currently not available.

TREATMENT CRITERIA:

Patient is NOT currently infected with SARS-CoV-2, has no known recent exposure to an individual infected with SARS-CoV-2 **and**

- whom vaccination with any available COVID-19 vaccine is not recommended due to a history of severe adverse reaction, or
- has moderate to severe immune compromise and may not mount an adequate immune response to COVID-19 vaccination :

Please select patient's medical conditions or treatments:

- Active treatment for solid tumor and hematologic malignancies
- Receipt of solid-organ transplant and taking immunosuppressive therapy
- Receipt of chimeric antigen receptor (CAR)-T-cell or hematopoietic stem cell transplant
- Moderate or severe primary immunodeficiency (e.g., DiGeorge syndrome, Wiskott-Aldrich syndrome)
- Advanced or untreated HIV infection
- Active treatment with high-dose corticosteroids
- Other _____

HYPERSENSITIVITY/ANAPHYLAXIS MANAGEMENT per Standardized Procedures

Special Instruction(s):

Provider Signature _____ NPI# _____ Date _____

Printed Name _____ Phone _____ Fax _____

Office Contact _____ Phone _____ Email _____