

Patient Name: _____ DOB: _____

Allergies: _____ Height (cm): _____ Weight (kg): _____

Diagnosis: _____ Diagnosis Code: _____

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Financial authorizations require clinical documentation of medical necessity. To ensure compliance, the criteria below must be indicated as completed by office representative. Incomplete documentation will be returned to the referring office for completion, resulting in delays to the patient receiving treatment.

- Ordering provider is credentialed at Sinai Hospital (Alvin and Lois Lapidus Cancer Center) or Carroll Hospital (William E. Kahlert Regional Cancer Center) to admit and write orders.
- Demographics / insurance information attached, or available in Cerner.
- Provider note dated within 30 days indicating medical need attached, or date if available in Cerner: _____
- Pre-appointment lab results completed within 30 days (transferrin saturation, ferritin, folate, vitamin B12 level, hemoglobin & hematocrit) and results attached, or date if available in Cerner: _____

NOTE:

- **Abnormal results may result in the patient being referred back to the prescriber to address other potential causes of anemia prior to initiating darbepoetin.**
- **Darbepoetin alfa should not be initiated less than four weeks after IV iron administration if applicable and until Hgb is < 10g/dL.**
- **Darbepoetin alfa is not recommended in patients with uncontrolled hypertension. Ordering provider should ensure blood pressure is adequately controlled before initiation of therapy and closely managed during therapy.**

Treatment:

Anemia of chronic kidney disease, not on dialysis

target hemoglobin: 10-11 g/dL Other: _____

Initial dose based on patient weight:

- Weight 40-60 kg: Darbepoetin alfa 25 mcg subcutaneously every 4 weeks
- Weight 61-90 kg: Darbepoetin alfa 40 mcg subcutaneously every 4 weeks
- Weight ≥ 91 kg: Darbepoetin alfa 60 mcg subcutaneously every 4 weeks

SUBSEQUENT DOSES (all indications):

- Pharmacy will modify doses based on Hgb/Hct trends according to the LifeBridge Health Erythropoetin Stimulating Agents (ESAs) Dosing Policy
- LifeBridge Health Erythropoetin Stimulating Agents (ESAs) Dosing Policy will be made available to prescriber at request.

Lab Orders:

- CBC before each dose
- Iron, TIBC, transferrin saturation, ferritin every 3 months during treatment and per Pharmacy as needed
Serum ferritin should be between 30-500 ng/mL and transferrin saturation between 20-50%. Pharmacy will order iron study as needed and contact prescriber for IV iron order if indicated.

Nursing Orders:

- Vitals before each dose
- Notify prescriber for SBP >160 mmHg

Protocol Orders:

- Hypersensitivity/Anaphylaxis: Follow Adult Hypersensitivity Protocol PRN per Nursing Protocol for treatment of hypersensitivity reaction.
- Port Care and Flush per Nursing Protocol: single-lumen flush protocol or double-lumen flush protocol as appropriate.

Provider's Name (Print): _____ Signature: _____ Date: _____

Contact Number: _____ Fax Number: _____

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