



PharmaCare Specialty Pharmacy FORTEO® Prescription Referral Form

FAX REFERRAL TO: 800-447-3694
Phone: 800-990-9247

Date: _____ **Needs by Date:** _____ •Ship to Patient Office Training at PharmaCare

<u>PATIENT INFORMATION</u>	<u>PRESCRIBER INFORMATION</u>
(Complete the following <i>or send patient demographic sheet</i>) Patient Name: _____ Address: _____ City, State, Zip: _____ Home Phone: _____ Alternate Phone: _____ Patient SS#: _____ Date of Birth: _____	Prescriber's Name: _____ State License #: _____ DEA#: _____ Group or Hospital: _____ Address: _____ City, State, Zip: _____ Phone: _____ Fax: _____ Contact Person: _____

INSURANCE INFORMATION

Primary Insurance/ Prescription Card:	PLEASE FAX COPY OF INS CARD (FRONT & BACK)	Secondary Insurance/ Prescription Card:	PLEASE FAX COPY OF INS CARD (FRONT & BACK)
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CLINICAL INFORMATION

(OPTIONAL – but will assist in insurance authorization and patient education)

Previous Treatment:	Bone Mineral Density Results:	Fracture History:
• Medication: _____ Reason for D/C: _____	• DXA Results (g/cm ²): _____ T-Score: _____ Date: _____	• Date: _____ Site: _____
• Medication: _____ Reason for D/C: _____	• DXA Results (g/cm ²): _____ T-Score: _____ Date: _____	• Date: _____ Site: _____
Diagnosis (ICD-9 Code): _____ <input type="checkbox"/> 733.0 - Osteoporosis <input type="checkbox"/> Other: _____		

PRESCRIPTION INFORMATION

MEDICATION	STRENGTH/SIZE	DIRECTIONS	QUANTITY	REFILLS
FORTEO®	750ug/3ml Pen	Inject 20ug (0.08ml) SC QD as directed	1 Pen (3ml)	11
B-D Pen Needles	31 gauge 5mm	Use with FORTEO® Pen as directed	100	3
Other: _____				
Other: _____				

Do not Substitute

Prescriber Signature

IMPORTANT NOTICE: This facsimile transmission is intended to be delivered only to the named addressee and may contain material that is confidential, privileged, proprietary or exempt from disclosure under applicable law. If it is received by anyone other than the named addressee, the recipient should immediately notify the sender at the address and telephone number set forth herein and obtain instructions as to disposal of the transmitted material. In no event should such material be read or retained by anyone other than the named addressee, except by express authority of the sender to the named addressee.