Cystic Fibrosis
Ph: (214) 919-2090 or (877) 753-6878
Fax: 1 (888) 294-9434

MAIN POINT OF CONTACT
Name:_______________________________
Phone:______________________________

Injection Training: ☐ MD Office ☐ Pharmacy to Arrange
Ship To : ☐ Patient Home ☐ MD Office

PATIENT INFORMATION (Use this area or attach patient demographics)

Name:______________________________ Phone:___________________________ Phone 2:______________________
Home Address:____ City:__________ State:_____ Zip Code:____________
DOB:_______________ SSN:_____________________ Sex: ☐ Male ☐ Female Height:_________ Weight:__________lbs.
Emergency Contact:____ Phone:____

INSURANCE INFORMATION (Use this area or attach copy of insurance card(s))

Primary Insurance:____________________________________ Secondary Insurance:___________________________________
ID#:________________________ RxBin:__________________ ID#:________________________ RxBin:___________________
RxGroup:____________________ Pcn:____________________ RxGroup:____________________ Pcn:_____________________

MEDICAL ASSESSMENT (Use this area or attach patient labs and other authorization information)

Primary Diagnosis:____ ICD10 Code:__________________

PRESCRIPTION INFORMATION *(Use this area or attach copy of RX(s))

☐ Pulmozyme (dornase alfa)
SIG: Dose: ____________mg for inhalation using recommended nebulizer
Frequency: ____________ Dispense Quantity:________ Refills:________
☐ NKDA Known Drug Allergies:_______________________________________

☐ Tobi (tobramycin)
SIG: Dose: ____________mg for inhalation using recommended nebulizer
Frequency: ____________ Dispense Quantity:________ Refills:________
☐ NKDA Known Drug Allergies:_______________________________________

ALL controlled substance quantities must be hand written in number and letter form

Prescriber Name:____ NPI#:____________________________________
Address:____ City:________________ State:____ Zip Code:____________
Phone:____ Fax:____

***Prescriber Signature:**____**Date:**_________________

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Please fax completed form to 1 (888) 294-9434