

Patient Information

(Please attach insurance card)

For **PAH** please utilize our Synergen form or the manufacturer enrollment forms on our website
www.synergernx.com/PAH

Name:	<input type="checkbox"/> M <input type="checkbox"/> F	DOB: _____/_____/_____
Street:	City	State: _____ Zip: _____
Phone:	Alt Phone:	Allergies:

Clinical Information

(Please attach all pertinent clinicals and lab results)

Diagnosis: Scleroderma Sarcoidosis Sjogren's syndrome
 Other: _____ Idiopathic Pulmonary Fibrosis

Previous Tried/Failed Medications: Duration: Reason for discontinuation:

Prescription

(E-scribes or accepted as well)

Drug Therapy	Strength	Directions	Quantity	Refills
<input type="checkbox"/> Bethkis	300mg/4mL	Inhale entire contents of one ampule twice daily in repeated cycles of 28 days on drug, followed by 28 days off drug.	224 mL	
<input type="checkbox"/> Bosentan				
<input type="checkbox"/> Cevimeline				
<input type="checkbox"/> Cyclosporine				
<input type="checkbox"/> Esbriet Tablets	<input type="checkbox"/> 267mg			
	<input type="checkbox"/> 801mg	Take 1 tablet by mouth 3 times daily with food		
<input type="checkbox"/> Mycophenolate mofetil				
<input type="checkbox"/> Ofev	<input type="checkbox"/> 100mg	Take 1 capsule by mouth twice daily with food		
	<input type="checkbox"/> 150mg	Take 1 capsule by mouth twice daily with food		
<input type="checkbox"/> Pulmozyme	1mg		QS for 30 Days	
<input type="checkbox"/> Tobramycin	300mg/5mL	Inhale entire contents of one ampule twice daily in repeated cycles of 28 days on drug, followed by 28 days off drug.	280mL	

Prescriber information

Deliver To: Patient Office

Prescriber:	Supervising Physician:
Contact Name:	Preferred method of contact: <input type="checkbox"/> Phone <input type="checkbox"/> Fax <input type="checkbox"/> Email
Phone: Ext: Fax:	Email:
Street:	City: State: Zip:
Signature:	Date: NPI

*By signing this form I authorize Synergen RX LLC and its employees to act as authorized agents on behalf of my office to obtain prior authorization through my patients insurance plan and to facilitate and enroll patients into patient assistance programs with manufacturers and other foundations.