

# INFUSION CLINIC REFERRALS

Thank you for choosing St. Peter's Health Medical Group Infusion Clinic! We look forward to partnering with you. Completing and submitting this referral sheet will help us provide the highest quality patient care. Please attach demographic information to this form and **fax all information to us at 406-495-6853**.

Please let us know the reason for your referral:     Urgent     Routine

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## We request the following supporting documents, if they exist:

- Order with provider's full name, signature, date, and time. Please see order forms on our webpage.
- Written authorization/pre-determination from the patient's insurance stating the medication is approved. The authorization/pre-determination needs to be approved under the patient's medical benefits for buy and bill, not pharmacy benefits. We cannot accept medications from specialty pharmacies. It is the responsibility of the referring provider to obtain the authorization/pre-determination.
- Last office notes, procedure notes, and laboratory results (per below) pertinent to the infusion ordered
- If the patient has a PICC line or mid line: insertion procedure note
- Labs:
  - Actemra: PPD or Quantiferon Gold
  - Benlysta: PPD or Quantiferon Gold
  - Boniva: DEXA Scan report, Complete metabolic panel (CMP), Vitamin D-25
  - Cimzia: PPD or Quantiferon Gold, Hepatitis B Core antibody, HBV
  - Entyvio: PPD or Quantiferon Gold
  - Fasenra: Complete Blood Count (CBC)
  - Infliximab: PPD or Quantiferon Gold, Hep B core antibody, HCV, HBV
  - IVIG: IGG level, IGA level, CBC, CMP
  - IV Iron: CBC, iron panel
  - Lemtrada: CBC, CMP, CD4, PPD or Quantiferon Gold
  - Ocrevus: Hep B core antibody, HBV
  - Orencia: PPD or Quantiferon Gold
  - Prolia: DEXA Scan report, CMP, Vitamin D-25 level
  - Reclast: DEXA Scan report, CMP, Vitamin D-25 level
  - Rituximab: Hep B core antibody, HBV, HCV
  - Simponi Aria: PPD or Quantiferon Gold, Hep B core antibody, HBV, HCV
  - Stelara: PPD or Quantiferon Gold
  - Tysabri: JCV

Our office will review all documents once received and your patient will be called to schedule. If the patient has questions about billing or cost, please contact our financial counselor at 406-447-2828.

Thank you again for choosing St. Peter's Health!

Best Regards,  
St. Peter's Health Infusion Clinic