



Physician Order/Prescription & Statement of Medical Necessity



Please fax completed form to Chiesi Total Care™ staff at 1-866-565-7794.

PATIENT INFORMATION

Patient Name (Last, First) \_\_\_\_\_
Social Security # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Sex: [ ] Male [ ] Female Date of Birth \_\_\_\_\_ (mm/dd/yyyy)
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
Primary Phone (Required) \_\_\_\_\_ Cell Phone \_\_\_\_\_ Language: [ ] English [ ] Other \_\_\_\_\_

Please attach copies of patient insurance and prescription cards – front and back.

MEDICAL INFORMATION

Diagnosis: [ ] Transfusional Iron Overload E83.111
Due to: [ ] Beta Thalassemia D56.1 [ ] Other Thalassemias D56.8 [ ] Other \_\_\_\_\_
Height \_\_\_\_\_ inches or \_\_\_\_\_ cm Weight \_\_\_\_\_ lb or \_\_\_\_\_ kg Allergies: [ ] None or Specify \_\_\_\_\_

Table with 3 columns: Lab test, Results, Date (mm/dd/yyyy). Row 1: Most recent serum ferritin level (acceptable level <500 ng/mL)

Table with 3 columns: If available please provide the following, Results, Date (mm/dd/yyyy). Row 1: Most recent liver iron concentration value (acceptable level <3,000 µg/g dry weight). Row 2: Most recent cardiac MRI T2\* value (acceptable level >20 ms)

Prior Chelation Therapy \_\_\_\_\_ Current Chelation Therapy \_\_\_\_\_

Transfusion History

Table with 2 columns: Transfusion History, Results. Row 1: Approximate number of blood units/month. Row 2: Approximate interval between transfusions (weeks)

FERRIPROX® (DEFERIPRONE) PRESCRIPTION/ORDER

[ ] Ferriprox® (deferiprone) Twice-A-Day tablets 1000 mg† Sig: Take \_\_\_\_\_ tablets po BID
[ ] Ferriprox oral solution 100 mg/mL Sig: Take \_\_\_\_\_ mL po TID or see Rx attached
(Standard dose is 75-99 mg/kg/day divided into 2 doses/day for Twice-A-Day or 3 doses/day for oral solution.) Dispense 30-day supply.

Number of Refills \_\_\_\_\_

† 500 mg and 1000 mg Three-Times-A-Day tablets are still available. Talk to your pharmacist for more information.

PHYSICIAN/OFFICE INFORMATION

Prescriber's Name (print) \_\_\_\_\_ Office Phone \_\_\_\_\_
Practice/Group Name \_\_\_\_\_ Office Fax \_\_\_\_\_
Address \_\_\_\_\_ Suite \_\_\_\_\_ License # \_\_\_\_\_
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
Office Contact Person \_\_\_\_\_ NPI # \_\_\_\_\_

By signing below, I certify that I am part of the Chiesi Total Care Program, and that the therapy described above is medically necessary and that the information provided is accurate to the best of my knowledge. I also attest that I have obtained the patient's authorization to release the above information and such other personal information as may be necessary to the Chiesi Total Care Program and/or their agents. If the patient is 18 years old or younger, I attest that I have obtained permission from the patient's legal guardian.

Prescriber's Signature \_\_\_\_\_ Date \_\_\_\_\_
Substitution Permitted \_\_\_\_\_ Dispense as Written \_\_\_\_\_

Ferriprox Twice-A-Day is available as 1000 mg BID tablets.
Ferriprox is available as 1000 mg and 500 mg (immediate release) Three-Times-A-Day tablets and as 100 mg/mL oral solution.
Please call 1-866-758-7071 if you have questions regarding this form, or contact Chiesi Total Care.
Please see Important Safety Information, including boxed WARNING, on the back.

## Indication

Ferriprox® (deferiprone) is an iron chelator indicated for the treatment of patients with transfusional iron overload due to thalassemia syndromes when current chelation therapy is inadequate.

Approval is based on a reduction in serum ferritin levels. There are no controlled trials demonstrating a direct treatment benefit, such as improvement in disease-related symptoms, functioning, or increased survival.

## Limitations of Use

Safety and effectiveness have not been established for the treatment of transfusional iron overload in patients with other chronic anemias.

## Important Safety Information

### **WARNING: AGRANULOCYTOSIS AND NEUTROPENIA**

- **Ferriprox can cause agranulocytosis that can lead to serious infections and death. Neutropenia may precede the development of agranulocytosis.**
- **Measure the absolute neutrophil count (ANC) before starting Ferriprox and monitor weekly while on therapy.**
- **Interrupt Ferriprox if infection develops and monitor the ANC more frequently.**
- **Advise patients taking Ferriprox to report immediately any symptoms indicative of infection.**

Ferriprox is contraindicated in patients with known hypersensitivity to deferiprone or to any of the excipients in the formulation.

In clinical studies, 7.5% of 642 patients treated with deferiprone developed increased ALT values. Four (0.62%) deferiprone-treated subjects discontinued the drug due to increased serum ALT levels and 1 (0.16%) due to an increase in both ALT and AST. Monitor serum ALT values monthly during therapy with Ferriprox and consider interruption of therapy if there is a persistent increase in the serum transaminase levels. Decreased plasma zinc concentrations have been observed on deferiprone therapy. Monitor plasma zinc, and supplement in the event of a deficiency.

Ferriprox can cause fetal harm. Advise females of reproductive potential to use an effective method of contraception during treatment with Ferriprox and for at least six months after the last dose. Advise males with female partners of reproductive potential to use effective contraception during treatment with Ferriprox and for at least three months after the last dose. Advise females not to breastfeed during treatment with Ferriprox and for at least 2 weeks after the last dose.

Avoid co-administration of Ferriprox with other drugs known to be associated with neutropenia or agranulocytosis; however, if this is unavoidable, closely monitor the absolute neutrophil count. Avoid co-administration with UGT1A6 inhibitors. Allow at least a 4-hour interval between administration of Ferriprox and drugs or supplements containing polyvalent cations (e.g., iron, aluminum, or zinc).

The most common adverse reactions are (incidence  $\geq 5\%$ ) nausea, vomiting and abdominal pain, alanine aminotransferase increased, arthralgia, and neutropenia.

Inform patients that their urine might show a reddish/brown discoloration due to the excretion of iron. This is a very common sign of the desired effect, and it is not harmful.

Advise patients to avoid alcohol while taking Ferriprox tablets (twice-a-day). Consumption of alcohol while taking Ferriprox tablets (twice-a-day) may result in more rapid release of deferiprone.

**Please see full Prescribing Information, including boxed WARNING and Medication Guide.**

For more information, visit [ferriprox.com](http://ferriprox.com).

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