3001 Apache Drive
Jonesboro, AR 72401
Phone: 870-972-1751

Patient Name:
Phone Number:
DOB: Age:

REGEN-COV™ (Casirivimab + Imdevimab) SUBCUTANEOUS INJECTION Orders

Subcutaneous injection is an alternative route of administration when intravenous infusion is not feasible and would lead to delay in treatment.

Drug Allergies:	**Weight** (40 kg or more): **Date of suspected exposure or symptom onset:**

Indication/Diagnoses:

☐ **Z20.828** Contact with and (suspected) exposure to other viral communicable diseases
☐ **U7.1** COVID-19 infection
☐ **Other** (include ICD-10 code(s) and description(s):

☐ Withdraw a **total dose of casirivimab 600 mg/5 mL AND imdevimab 600 mg/5 mL** into **FOUR syringes:** • **TWO** syringes, each containing **casirivimab 300 mg/2.5 mL**; and, • **TWO** syringes, each containing **imdevimab 300 mg/2.5 mL**.	**Repeat dosing for ongoing exposure (to begin four weeks after initial dose):** ☐ Withdraw a **total dose of casirivimab 300 mg/2.5 mL AND imdevimab 300 mg/2.5 mL** into **TWO syringes:** • **ONE** syringe containing **casirivimab 300 mg/2.5 mL**; and, • **ONE** syringe containing **imdevimab 300 mg/2.5 mL**. ☐ **Repeat every four weeks** for duration of ongoing exposure.

☑ Consecutively administer each syringe **subcutaneously** using a 25- or 27-gauge needle in a different injection site (thigh, back of arm, or abdomen except for 2 inches around navel), spacing injections apart and avoiding skin that is tender, damaged, bruised, or scarred.

Post-treatment:

☑ **Monitor patient for hypersensitivity reaction for a period of 60 minutes following injections.**
☑ If adverse reaction occurs, treat per orders/protocol as clinically indicated.
☑ Record vital signs immediately following injections and prior to discharge.
☑ Provide patient with discharge instructions.
☑ Send record of treatment to prescriber at fax number below.

Prescriber Name (print):_____ Fax:_____

Prescriber signature:_____ Date:_____

Revised 8/2/21

Please fax all orders to 870-931-0992
Pharmacy will contact patient to schedule appointment