

NHS SCOTLAND IMMUNOGLOBULIN – REQUEST FORM

This form must be completed by a prescriber and sent to pharmacy/screened by a pharmacist before supply is made

PATIENT DETAILS					
Print name:				CHI number:	
Patient postcode					
Height:	cm	Weight:	kg	Dose adjusted weight (if overweight)	kg
Hospital / department for treatment					
Consultant			Speciality		

TREATMENT DETAILS					
First Treatment				Ongoing treatment	
Expected treatment duration			Short term (< 3months)		Long term
Intravenous		Subcutaneous			

Specific brand required (e.g. immunology patient or allergic reaction to specific product)	Yes / No/Details
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Replacement therapy (repeat prescription)							
Dose		Frequency		Weeks supply		Prescription valid for:	

Immunomodulatory therapy (e.g. neurology, rheumatology, dermatology)				
Dosage regimen	grams / kg over	days	Total dose required	grams

Prescribed by:				
Print name:		Grade:		Phone No/ Bleep:
Signature				Date

Pharmacist screen:				
Print name:		Grade:		Phone No/ Bleep:
Signature				Date

Please select patient diagnosis on the following pages, and any reason for an alternative dose regimen.

Then send completed form to pharmacy

Refer to NHS Scotland Clinical Guidelines for Immunoglobulin Use for full dosing information and further information
www.nppeag.scot.nhs.uk

Dose calculator can be found at <https://ivig.transfusionontario.org/dose/>

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Hospital /Ward			

Red Indications	Short term <3 month	Long term	Usual starting dose*	Alternative regimen + reason
Acquired red cell aplasia			1-1.2g/kg in divided doses	
Alloimmune thrombocytopenia (foetal-maternal/neonatal) including GALD			Maternal: 0.5-1g/kg weekly Neonatal: 0.4g-1g/kg single dose, can be repeated daily for up to 3 doses	
Autoimmune haemolytic anaemia (including Evan's syndrome)			1-2g/kg in 2-5 divided doses. May be repeated	
Chronic inflammatory demyelinating Polyradiculoneuropathy			2g/kg over 2-5 days, often repeated after 4-8 weeks then 1g/kg	
Coagulation factor inhibitors (alloantibodies and autoantibodies)			0.4g/kg for 5 days or 1g/kg for 2 days	
Guillain-Barré syndrome (includes Bickerstaff's brain stem encephalitis and other GBS variants)			2g/kg over 5 days, may be repeated after 14 days	
Haemolytic disease of the newborn			0.5g/kg over 4 hours	
Haemophagocytic syndrome			2g/kg in 2-5 divided doses. May be repeated on relapse	
HSCT in primary immunodeficiencies			0.4-0.6g/kg/month	
Immune thrombocytopenic purpura (acute and persistent, excluding chronic)			1g/kg as single dose, may be repeated after 24-48 hours	
Kawasaki disease			2g/kg single dose over 10-12 hours, may be repeated	
Myasthenia gravis (including Lambert-Eaton myasthenic syndrome)			1g/kg unless life threatening with respiratory/bulbar involvement	
PIMS-TS			2g/kg single dose over 10-12 hours, may be repeated	
Post-transfusion purpura			2g/kg over 2 days	
Prevention of delayed haemolytic transfusion reaction			1-2g/kg over 2 – 5 days	
Primary immunodeficiency involving antibody deficiency			0.4-0.6g/kg/month	
Specific antibody deficiency			0.4-0.6g/kg/month for 6-12 months	
Thymoma with immunodeficiency			0.4-0.6g/kg/month	
Toxic epidermal necrolysis, Stevens Johnson syndrome			2g/kg as a single dose or divided over 3 consecutive days	
Blue Indication	Short term <3 month	Long term	Usual starting dose*	Alternative regimen + reason
Acquired von Willebrand disease			0.4g/kg for five days / 1g/kg for two days Delete as applicable	
Autoimmune congenital heart block			0.4g/kg every 3 weeks for 5 treatments from weeks 12-24 gestation	
Autoimmune uveitis			1.5g/kg/month for 3 months	
B Cell aplasia			0.4 – 0.6 g/kg/month	
Fetal hydrops			1 – 1.2g/kg in divided doses	
Immunobullous diseases			2g/kg over 2-5 days	
Necrotising (PVL-associated) staphylococcal sepsis			2g/kg as a single dose	
Secondary antibody deficiency (any cause)			0.4-0.6g/kg/month	
Severe or recurrent Clostridium difficile colitis			0.4g/kg as single dose which can be repeated	
Staphylococcal or streptococcal toxic shock syndrome			2g/kg as a single dose	
Transplantation (solid organ)				

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Grey Indications (Individual patient request required) Confirm approved <input type="checkbox"/>			
Immune-mediated disorders with limited evidence of immunoglobulin efficacy		Presumed immune-mediated disorders with little or no evidence of efficacy	
Acute disseminated encephalomyelitis (if high dose steroids have failed)	<input type="checkbox"/>	Acquired red cell aplasia NOT due to parovirus B19	<input type="checkbox"/>
Autoimmune encephalitis (including NMDA and VGKC antibodies, among others)	<input type="checkbox"/>	Acute idiopathic dysautonomia	<input type="checkbox"/>
Cerebral infarction with antiphospholipid antibodies	<input type="checkbox"/>	Aplastic anaemia/pancytopenia	<input type="checkbox"/>
Chronic ITP	<input type="checkbox"/>	Atopic dermatitis/eczema	<input type="checkbox"/>
CNS Vasculitis	<input type="checkbox"/>	Autoimmune neutropenia	<input type="checkbox"/>
Complex regional pain syndrome	<input type="checkbox"/>	Chronic facial pain	<input type="checkbox"/>
Inflammatory myopathies (including dermatomyositis)	<input type="checkbox"/>	Diabetic proximal neuropathy	<input type="checkbox"/>
Intractable childhood epilepsy	<input type="checkbox"/>	Haemolytic uraemic syndrome	<input type="checkbox"/>
Multifocal motor neuropathy	<input type="checkbox"/>	PANDAS	<input type="checkbox"/>
Neuromyotonia	<input type="checkbox"/>	Paraneoplastic disorders that are not known to be B- or T-cell mediated	<input type="checkbox"/>
Opsiclonus myoclonus	<input type="checkbox"/>	POEMS	<input type="checkbox"/>
Paraprotein-associated demyelinating neuropathy (IgM, IgG or IgA)	<input type="checkbox"/>	SLE without secondary immunocytopenia (including juvenile)	<input type="checkbox"/>
Post-exposure prophylaxis for viral or pathogenic infection if intramuscular injection is contraindicated or treatment when hyper-immune immunoglobulins are unavailable	<input type="checkbox"/>		
Pyoderma gangrenosum	<input type="checkbox"/>		
Rasmussen syndrome	<input type="checkbox"/>		
Stiff person syndrome	<input type="checkbox"/>		
Systemic juvenile idiopathic arthritis	<input type="checkbox"/>		
Systemic vasculitides and ANCA disorders	<input type="checkbox"/>		
Urticaria (severe, intractable)	<input type="checkbox"/>		
Other (free text)		Other (free text)	

