

For the Provider Office – Part B Injectable Drug Request Form

Non-Urgent Requests: Fax to (866) 369-6038
To speak to a PerformRx representative: call (800) 578-0898
Form must be completed for processing.

Urgent Requests: Fax to (866) 533-5491
Note: urgent requests should be reserved for those situations in which applying the standard procedure may seriously jeopardize the member's life, health, or ability to regain maximum functions.

Member's Name: _____ Member ID#: _____
Address: _____ Apt # or Suite #: _____
City: _____ State: _____ Zip Code: _____
Phone #: _____ Height: _____ Weight: _____ lbs = _____ Kg Birth Date: _____

Provider's Name: _____ NPI/License #: _____
Address: _____ Apt # or Suite #: _____
City: _____ State: _____ Zip Code: _____
Contact Person: _____ Phone #: _____ Fax #: _____ E Mail: _____

Is the member/member currently residing in a Long-Term Care (LTC) facility? Yes No

To be Administered from (on): _____ to _____
Drug Name: _____ Item # (see below): _____
Sig (How Administered): _____
Diagnosis: _____ ICD-9 Diagnosis Code: _____
Justification for use (add attachment if necessary) _____

Please Check for Delivery to Provider's Office or Other Location. *Form is for Drug(s) to be Administered only in Provider's Office.*

Deliver to: Provider's Office Other: _____
Provider Signature: _____ Date: _____

Antibiotics				Preferred NDCs	GCNs	Steroids				Preferred NDCs	GCNs
#1	Ampicillin Sodium	500mg	vial, 1s	00015-7403-20	39245	#27	Aristospan Parenteral	20mg/mL, 1mL	vial, 1s	00469-5119-01	27560
#2	Ampicillin Sodium	1g	vial, 1s	00015-7404-20	39240	#28	Aristospan Intralesional	5mg/mL, 5mL	vial, 1s	00205-0206-05	27562
#3	Ampicillin Sodium	2g	vial, 1s	00015-7405-20	39243	#29	Celestone Soluspan	3-3mg/mL, 5mL	vial, 1s	00085-0566-05	82300
#4	Ampicillin Sodium	250mg	vial, 1s	00015-7402-20	39244	#30	Decadron LA	8mg/mL, 1mL	vial, 1s	00006-7644-01	27280
#5	Bicillin LA	300,000u/ml	10mL vial, 1s	00008-0163-01	38940	#31	Decadron w/ Xylocaine	4-10mg/mL, 5mL	vial, 1s	00006-7625-03	68250
#6	Bicillin LA	1.2mu/2mL	syringe, 10s	00008-0021-35	50463	#32	Depo-Medrol	40mg/mL, 1mL	vial, 1s	00009-0280-02	27003
#7	Bicillin LA	2.4mu/4mL	syringe, 10s	00008-0021-12	50473	#33	Depo-Medrol	80mg/mL, 1mL	vial, 1s	00009-3475-01	27006
#8	Bicillin C-R	1.2mu/2mL	syringe, 10s	00008-0026-35	82782	#34	Methylprednisolone Sod. Suc.	40mg/mL, 1mL	vial, 1s	00074-5684-01	27032
#9	Bicillin C-R	2.4mu/4mL	syringe, 10s	00008-0026-22	82783	#35	Prednisolone Tebutate (TBA)	20mg/mL, 10mL	vial, 1s	00418-0921-41	26891
#10	Cefazolin Sodium	500mg	vial, 1s	00015-7338-12	39908	#36	Triamcinolone Acetonide	40mg/ml, 1mL,	vial, 1s	00402-0204-01	27452
#11	Cefazolin Sodium	1g	vial, 10s	00002-7011-01	39621	Hormones					
#12	Gentamycin	10mg/ml, 2mL	vial, 25s	00641-0394-25	41130	#37	Depo-Testosterone	100mg/mL, 10mL	vial, 1s	00009-0347-02	10191
#13	Gentamycin	40mg/mg, 2mL	vial, 25s	00641-0395-25	41132	#38	Depo-Testosterone	200mg/mL, 1mL	vial, 1s	00009-0417-02	10194
#14	Gentamycin	40mg/mL, 20 mL	vial, 10s	00641-2331-43	41132	#39	Depo-Estradiol	5mg/mL, 5mL	vial, 1s	00009-0271-02	27001
#15	Pen G Potassium	5mu/ vial,	10s	00003-0673-71	38804	#40	Estrone Aqueous	5mg/mL 10mL	vial, 1s	00418-0301-10	10828
#16	Rocephin	250mg	vial, 10s	00004-1962-01	39960	#41	Nandrolone Decanoate	50mg/mL, 2mL	vial, 1s	00402-0407-02	10581
#17	Rocephin	500mg	vial, 10s	00004-1963-01	39961	#42	Nandrolone Decanoate	100mg/mL, 2mL	vial, 1s	00052-0697-02	10580
#18	Rocephin	1g	vial, 10s	00004-1964-01	39962	#43	Nandrolone Decanoate	200mg/mL, 1mL	vial, 1s	00052-0698-01	10582
#19	Rocephin	2mg	vial, 10s	00004-1965-01	39963	Miscellaneous					
#20	Tobramycin	40mg/mL, 2mL,	vial, 10s	00205-3027-04	41185	#44	Calcitonin Salmon	200mcg/mL, 2mL	vial, 2s	00078-0149-23	26431
#21	Tobramycin	10mg/mL, 30mL,	vial, 10s	00205-3027-08	41185	#45	Cyanocobalamin	1000mg/mL, 1mL,	vial, 25s	00517-0031-25	94594
#22	Vancomycin HCl	500mg	vial, 10s	00205-3154-88	41280	#46	Dicyclomine	10mg/mL, 2mL	Ampul, 5s	00068-0809-23	19290
#23	Vancomycin HCl	1g	vial, 10s	00205-3027-08	41281						
#24	Wycillin	1.2mu/1mL	syringe, 10s	00008-0018-34	38892						
#25	Wycillin	2.4 mu/2mL	syringe, 10s	00008-0018-35	38892	#48 Other (write in):					
Arthritis Treatment											
#26	Methotrexate Sodium	25mg/mL, 2mL	vial, 1s	10819-0940-01	38466						