OSTEOPOROSIS
Prescription Referral Form

blue sky SPECIALTY PHARMACY

Phone: 843-352-7662 | Fax: 833-898-3992 | Backup Fax 843-352-7629 | 1501 Belle Isle Ave #150 Mt Pleasant SC 29464

PATIENT INFORMATION - PLEASE FORWARD FRONT AND BACK OF INSURANCE CARDS

First Name: ______ Last Name: ______ Date of Birth: ______ ☐ M ☐ F

Street Address: ______ City: ______ State: ______ Zip: ______

Cell Phone: ______ SSN: ______ Patient Preferred Language: ☐ English ☐ Spanish ☐ ______

PRESCRIBER INFORMATION

Name: ______ DEA: ______ NPI: ______

Address: ______

Phone Number: ______ Fax Number: ______ Contact Person: ______

Office's Preferred Method of Contact: ☐ Phone ☐ Fax ☐ Portal ☐ Email: ______ ☐ Other: ______

PATIENT CLINICAL INFORMATION / HISTORY -PLEASE FORWARD ALL CHART NOTES AND LABWORK

Diagnosis: ______ ICD 10: ______ Weight: ______ Height: ______ T-Score: ______

Drug Allergies: ______ Date of Last DEXA: ______

Previous / Failed Medications: ______

History of Fracture: ☐ Yes ☐ No Date of Fracture: ______ (PLEASE FORWARD DEXA SCAN)

PRESCRIBING INFORMATION

☐ NEW ☐ RESTART ☐ CONTINUING | SHIPPING PREFERENCE: ☐ Deliver Medication to Patient ☐ Deliver Medication to MDO

MEDICATION	DOSAGE	SIG	QTY	RFLS
☐ EVENITY	☐ 150mg/1.17mL PFS	☐ Inject 210mg SC once monthly		
☐ FORTEO	☐ 600mcg/2.4mL Pen	☐ Inject 20mcg SC once daily		
☐ 31G Needles	☐ 5mm Pen Needles	☐ Use as directed with Forteo		
☐ PROLIA	☐ 60mg/mL PFS	☐ Inject 60mg SC every 6 months		
☐ TERIPARATIDE	☐ 620mcg/2.48mL Pen	☐ Inject 20mcg SC once daily		
☐ 31G Needles	☐ 5mm Pen Needles	☐ Use as directed with Teriparatide		

PRESCRIPTION SIGNATURE

Dispense as Written: ______ Substitution Permitted: ______ Date: ______

I authorize Blue Sky Specialty Pharmacy and it's representatives to act as my agent in order to initiate and execute the insurance prior authorization process / appeals if necessary, in doing so, to release clinical information via phone / fax to appropriate third party payer

Important Notice: This fax is intended to be delivered only to the named addressee. It contains material that is confidential, privileged, proprietary or exempt from disclosure under applicable law. If you have received this communication and you are not the intended recipient, you should not disseminate, distribute, or copy this fax. Please notify sender immediately if you have received in error and then destroy this document immediately.