DELTADRUGS

Injectable Diabetic Medication

437 Fernando Court • Glendale, CA 91204 • **MAIN:** 818.309.2884 • **FAX:** 818.309.1704 • www.deltadrugs.com

PATIENT INFORMATION

Patient Name: _____ Patient SSN#: _____

Address: _____
Address, City, State, Zip Code

Phone #: _____ 2nd Phone #: _____ Date of Birth: _____ Gender: ❑ Male ❑ Female

Weight (lbs): _____ Height (in.): _____ Allergies: _____

Primary Insurance: _____ Secondary Insurance: _____

ID#: _____ Phone #: _____ ID#: _____ Phone #: _____

FAX COPY OF INSURANCE CARD (FRONT & BACK)

CLINICAL INFORMATION

ICD-10 Diagnosis
❑ E10.0 Diabetes Mellitus Type I
❑ E11.0 Diabetes Mellitus Type II

Comorbidities:
_____

Medication Reconciliation:
_____

Prior Medication History
❑ Tresiba ❑ Novolog ❑ Insulin N ❑ R ❑ Invokana ❑ Onglyza ❑ Actos
❑ Glipizide ❑ Humalog ❑ Glucophage ❑ Jardiance ❑ Glyburide ❑ Amaryl

Failed due to:
❑ Failure to treat ❑ Failure to control A1C ❑ Failure to control BG ❑ Hypoglycemia
❑ Nausea ❑ Vomiting ❑ Metallic taste in the mouth

FAX COPY OF ALL RELATED CLINICAL/LAB INFO

MEDICATION	STRENGTH/SIZE	DIRECTIONS	QTY	REFILLS
❑ BYDUREON® EXENATIDE	❑ 2 mg	❑ Inject 1 syringe once a week	❑ 4 syringes	
❑ BYETTA® EXENATIDE	❑ 5 mcg ❑ 10 mcg	❑ Inject 1 syringe once a day	❑_____	
❑ TANZEUM® ALBIGLUTIDE	❑ 30 mg ❑ 50 mg	❑ Inject 1 syringe once a week	❑ 4 syringes	
❑ TOUJEO® INSULIN GLARGINE	❑ 300 u/mL	❑_____	❑_____	
❑ TRESIBA® INSULIN DEGLUDEC	❑ 200 u/mL ❑ 100 u/mL	❑_____	❑ 4.5 mL	
❑ TRULICITY® DULAGLUTIDE	❑ 0.75 mg/0.5 mL ❑ 1.5 mg/0.5 mL	❑_____	❑_____	
❑ VICTOZA® LIRAGLUTIDE		❑ Inject 1 syringe once a day	❑ 2 pens ❑ 3 pens	
❑ PEN NEEDLES	❑ 31 gauge ❑ 4 mm ❑ 32 gauge ❑ 5 mm ❑ 6 mm			

Injection Training Provided By: ❑ Physician's Office ❑ Delta Drugs | Ship to: ❑ Physician's Office ❑ Patient's Home ❑ Other: _____

PHYSICIAN INFORMATION

Physician Name: _____ Contact: _____ NPI#: _____

Address: _____
Address, City, State, Zip Code

Phone #: _____ Fax#: _____ Email: _____

Physician's Signature: _____ Date: _____ ❑ Dispense As Written

I AUTHORIZE DELTA DRUGS AND ITS REPRESENTATIVES TO ACT AS AN AGENT TO INITIATE AND EXECUTE THE INSURANCE PRIOR AUTHORIZATION PROCESS.