

Place referral to infusion clinic first

**ALLERGIES**  
Lisinopril

DukeWELL Elig

8:30 AM RETURN

BP: 146/88 !

Heart Rate: 87

Wt: 115.3 kg !

BMI: 41.03 kg/m<sup>2</sup> !

Dosing Wt: —

**SINCE LAST DUKE  
NEPHROLOGY VISIT**

Internal Med, Radiology,  
Rheumatology

! Lab (17)

Imaging (1)

**CARE GAPS**

! 4

Start Review

**Cardiovascular/Peripheral vascular**

Essential hypertension

**Respiratory/Allergy**

AR (allergic rhinitis)

Severe obstructive sleep apnea

**Endocrine**

Dyslipidemia

Vitamin D deficiency

Obesity, Class III, BMI 40-49.9 (morbid obesity) (CMS-HCC)

**Transplant**

Long-term use of immunosuppressant medication

**GU/Nephrology**

Proteinuria

Minimal change disease

**Dermatology**

Seborrheic dermatitis of scalp

Pharmaceuticals

fluocinolone (DERMA-SMOOTH) 0.01 % external oil

hydroXYchloroQUINE (PLAQUENIL) 200 mg tablet

levonorgestrel (MIRENA) 20 mcg/24 hr (5 years) IUD

! losartan (COZAAR) 50 MG tablet

multivitamin tablet

! mycophenolate (CELLCEPT) 500 mg tablet

! PARoxetine (PAXIL) 10 MG tablet

! semaglutide (OZEMPIC) 2 mg/dose (8 mg/3 mL) pen injector

**Tobacco History** 3 items ^

Smoking Status Never

Smokeless Tobacco Status Never

Smoking Cessation

+ ADD ORDER



+ ADD DX (3)

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**Tobacco History** 3 items

Smoking Status Never

Smokeless Tobacco Status Never

Smoking Cessation

ambulat



+ ADD DX (3)

Choose preferred location and reason for referral. All referrals to Infusion Center require an expiration date. Most referrals are set for 1 year. In comment section write, "This referral expires on 4/25/2024" if referring on 4/26/2023

**Ambulatory Referral to Infusion Center (Non-Oncology)** ✓ Accept ✗ Cancel

Class:  Internal Ref  Internal Referral  External Referral

Referral:  Override restrictions  
To provider:

Priority:  Routine  Routine  STAT  ASAP

Process Inst.: Note about PRIORITY:  
STAT Appointment within 24 hours  
ASAP Appointment within 7 days  
Routine Appointment in more than 7 days

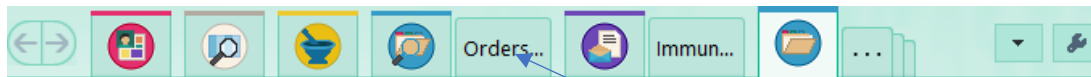
Preferred location:  Brier Creek  Duke  Duke Raleigh Hospital  South Durham  No Preference  Other

Reason for Referral:

Contact requesting provider if appointment date is greater than:

Comments:

Sched Inst.:



4/26/2023 visit with Thiam

My Sticky Note Last updated: Today  
pt of Dr. Singh

- Review
- Problem List
- Visit Info
- Goals
- Medication Grid
- Episodes
- Learning Screening
- Outside Meds
- Labs To Collect Link
- Home Vital Signs
- IPV/DV Screening
- Oxygen Therapy

Review

**Allergies**  
Lisinopril Other (See Comments), Cough

**Problem List** 11 items  
Problems from outside sources need reconciliation.  
**Cardiovascular/Peripheral Vascular**  
Essential hypertension  
**Respiratory/Allergy**  
AR (allergic rhinitis)  
Severe obstructive sleep apnea  
**Endocrine**  
Dyslipidemia  
Vitamin D deficiency  
Obesity, Class III, BMI 40-49.9 (morbid obesity) (CMS-HCC)  
**Transplant**  
Long-term use of immunosuppressant medication  
**GU/Nephrology**  
Proteinuria  
Minimal change disease  
**Dermatology**  
Seborrheic dermatitis of scalp

**Medications** Prior Authorizations  
Medications from outside sources need reconciliation.  
acetaminophen (TYLENOL) 325 MG tablet  
amLODIPine (NORVASC) 2.5 MG tablet  
cholecalciferol (VITAMIN D3) 1000 unit capsule  
fluocinolone (DERMA-SMOOTH) 0.01 % external oil  
hydrOXYchloroQUINE (PLAQUENIL) 200 mg tablet  
levonorgestrel (MIRENA) 20 mcg/24 hr (5 years) IUD  
losartan (COZAAR) 50 MG tablet  
multivitamin tablet  
mycophenolate (CELLCEPT) 500 mg tablet  
PARoxetine (PAXIL) 10 MG tablet  
semaglutide (OZEMPIC) 2 mg/dose (8 mg/3 mL) pen injector

**Tobacco History** 3 items  
Smoking Status Never  
Smokeless Tobacco Status Never  
Smoking Cessation

Click on Orders for later to place the infusion or ESA order

Search for new orders

+ ADD DX (3)

Choose one of the Infusion options on the left

Orders for Later

My Sticky Note Last updated: Today

ORDERS FOR LATER/PROCEDURES

- Destination Facility
- Reminder
- Order Sets
- Orders
- Signed/Held Ord...

THERAPY PLAN REVIEW

- Therapy Plan Re...
- Reminder
- Apheresis Therapy
- IV Access
- D/C 6/1/23
- Infusion A
- Infusion B
- Infusion C
- Infusion D
- Transplant ThPI
- Onc/ABMT Th PI
- Peds/PBMT ThPI
- HBOT Therapy
- Recur Ords

**Destination Facility**

Time taken: 4/26/2023 0905 More  Show All Choices

Facility Destination

Facility Destination

Create Note

Restore Close Previous Next Cancel

**Reminder**

**REMINDER: You must select a Facility Destination above to access the order sets for that facility. Don't forget to click Next (F8) or Close (F9) to register your selection.**

# Orders for Later

My Sticky Note Last updated: Today

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### Infusion A

ⓘ No assigned therapy plan

Search  + Assign

**Favorites** ⤴

**DARBEPOETIN** ★

Available(120) ⌵

✓ Close ↑ Previous ↓ Next

### Infusion B

ⓘ No assigned therapy plan

Search  + Assign

Available(120) ⌵

### Infusion C

ⓘ No assigned therapy plan

Search  + Assign

Available(120) ⌵

### Infusion D



Type product into search box

Orders for Later

My Sticky Note Last updated: Today

+ Create Note

My Note Incomp

ORDERS FOR LATER/PROCEDURES

Destination Facility

Reminder

Order Sets

Orders

Signed/Held Ord...

THERAPY PLAN REVIEW

Therapy Plan Re...

Reminder

Apheresis Therapy

IV Access

D/C 6/1/23

Infusion A

Infusion B

Infusion C

Infusion D

Transplant ThPI

Onc/ABMT Th PI

Peds/PBMT ThPI

HBOT Therapy

Recur Ords

Infusion B

No assigned therapy

Search

Available(120)

Close

Infusion C

No assigned therapy

Search

Available(120)

Infusion D

No assigned therapy

Search

Available(120)

Assign

Transplant Therapy Plan

Record Select

Search Recent

ferrelecit

%	Protocol Name	Protocol ID
<input checked="" type="checkbox"/>	FERRLECIT	2010000120
<input checked="" type="checkbox"/>	ONC FERRLECIT	11500000402

2 records total, all records loaded.

Accept Cancel

- Dyslipidemia
- Proteinuria
- Lupus (systemic
- AR (allergic rhini

Pend on saving n

+ ADD ORDER

+ ADD DX (3)

Choose start date and Treatment department. Also, link this to a diagnosis. Then click "Assign Plan".

## Orders for Later



My Sticky Note Last updated: Today


+ Create Note 1 HTN 2 TRANSFU 3 C



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### Therapy Plan Properties - FERRLECIT

Plan name: FERRLECIT


Plan start date:   



Lead provider: THIAM, HADJA FADIMA 


Treatment department:   

**Problems** Preview Plan

Problems associated with this treatment are:

 None.

<input type="checkbox"/>	E78.5	Dyslipidemia			
<input type="checkbox"/>	R80.9	Proteinuria			* s/p kidney biopsy minimal change disease or likely a lupus glomerular podocytopathy did not definitively demonstrate lupus nephritis June 20, 2014
<input type="checkbox"/>	M32.9	Lupus (systemic lupus erythematosus) (CMS-HCC)			
<input type="checkbox"/>	J30.9	AR (allergic rhinitis)			
<input type="checkbox"/>		M32.19 Systemic lupus erythematosus with other organ involvement, unspecified SLE type (CMS-HCC)			
<input type="checkbox"/>		R80.1 Persistent proteinuria			

 Add

Add to favorites



All required labs and medications pre-populate.  
Review for accuracy and click the box next to the product.

## Orders for Later

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	Interval	Duration
<input type="checkbox"/> <b>FERRLECIT</b> ⤴ Not Signed		
<input type="checkbox"/> Lab ⤴		
<input type="checkbox"/> Complete Blood Count (CBC) Due: 1 time this week STAT, Clinic Collect Release to patient: Immediate	Every 4 weeks	2/2 remaining
<input type="checkbox"/> Hemoglobin Due: PRN STAT, Clinic Collect Release to patient: Immediate	PRN	8/8 remaining
<input type="checkbox"/> Ferritin Due: PRN STAT, Clinic Collect Release to patient: Immediate	PRN	8/8 remaining
<input type="checkbox"/> Pre-Medication ⤴ <a href="#">↑ Move Up</a>		
<input type="checkbox"/> diphenhydramINE (BENADRYL) capsule 25 mg Due: Every visit 25 mg, Oral, Once, Starting when released, For 1 dose	Every visit	8/8 remaining
<input type="checkbox"/> acetaminophen (TYLENOL) tablet 650 mg Due: Every visit 650 mg, Oral, Once, Starting when released, For 1 dose Maximum acetaminophen intake from all sources should not exceed 75 mg/kg OR 4 grams in any 24 hour period, whichever is less.	Every visit	8/8 remaining
<input type="checkbox"/> Medication ⤴ <a href="#">↑ Move Up</a>		
<input type="checkbox"/> ferric gluconate (FERRLECIT) 125 mg in sodium chloride 0.9% 110 ml IVPB	1 time a week	8/8 remaining

After review, sign plan

## Orders for Later

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<input checked="" type="checkbox"/>	Medication ^	↑ Move Up
<input checked="" type="checkbox"/>	ferric gluconate (FERRLECIT) 125 mg in sodium chloride 0.9% 110 mL IVPB Due: 1 time this week 125 mg, Intravenous, Administer over 1 Hours, Once, Starting when released, For 1 dose	1 time a week 8/8 remaining
<input checked="" type="checkbox"/>	Emergency Medications ^	↑ Move Up
<input checked="" type="checkbox"/>	If a hypersensitivity reaction occurs, stop infusion, activate the appropriate Hypersensitivity Reaction Protocol, and notify Provider. Due: PRN Order details If a hypersensitivity reaction occurs, stop infusion, activate the appropriate Hypersensitivity Reaction Protocol, and notify Provider.	PRN 8/8 remaining
<input checked="" type="checkbox"/>	Prior Auth/Scheduling ^	↑ Move Up
<input checked="" type="checkbox"/>	DO NOT REMOVE. Notice for Scheduling, Authorization and Medical Necessity Due: Thu 4/27/2023 1 each, XX, Once, Starting when released, For 1 dose	Once 1/1 remaining

Sign Plan Edit Interval

Close Previous Next

Infusion D

No assigned therapy plan

Then, click Review Plan

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<input type="checkbox"/>	Medication <sup>⤴</sup>	<a href="#">↑ Move Up</a>
<input type="checkbox"/>	<input checked="" type="checkbox"/> ferric gluconate (FERRLECIT) 1 time a week <a href="#">📄</a> <a href="#">✕</a> 125 mg in sodium chloride 0.9% 110 mL IVPB Duration: 8/8 remaining Due: 1 time this week 125 mg, Intravenous, Administer over 1 Hours, Once, Starting when released, For 1 dose	
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<input type="checkbox"/>	<input checked="" type="checkbox"/> DO NOT REMOVE. Notice for Scheduling, Authorization and Medical Necessity Once <a href="#">📄</a> <a href="#">✕</a> Duration: 1/1 remaining Due: Thu 4/27/2023 1 each, XX, Once, Starting when released, For 1 dose	

Review Plan

Never reviewed

Clear Unsigned

Sign (0)

[✕](#) Remove (0)

[Edit Interval](#)

Close

[↑ Previous](#)

[↓ Next](#)