



Infusion Center

KENNEBUNK | ROCK ROW | TOPSHAM | PORTSMOUTH
PHONE: (207) 303-3225 | FAX: (207) 692-2473

Kisunla (Donanemab) Order Form—J0175

Patient Name	Middle	Last	DOB
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Diagnosis	Diagnosis Code
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Height (cm)	Actual Weight (kg)	Allergies
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- Prior to initiation of therapy:
 - Documentation of brain MRI (within one year) is required.
 - Apolipoprotein E ε4 (ApoE ε4) status testing
- Brain MRIs are also required prior to doses 2, 3, 4, and 7.

KISUNLA DOSING:

Initial dosage:

- ☐ 700 mg IV every 4 weeks for 3 doses

Maintenance dosage:

- ☐ 1,400 mg IV every 4 weeks until amyloid plaques are reduced to minimal levels on amyloid PET imaging.

Orders valid through: _____

KISUNLA ADMINISTRATION:

- Administer over 30 minutes and flush line with NS after infusion is complete. Observe for infusion and hypersensitivity reactions during infusion and for at least 30 minutes post infusion.

In the event of a hypersensitivity reaction, patients will be treated according to NECS protocols for the management of infusion-room drug reactions.

Provider Name	Provider Signature
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Date	Phone	Fax	Pager
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