NEW ENGLAND
Cancer Specialists

Infusion Center

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

Stelara (Ustekinumab)—J3357

Patient Name | Middle | Last | DOB

Diagnosis | Diagnosis Code

Height (cm) | Actual Weight (kg) | Allergies

Please list any premeds needed.

*Required labs: TB screening prior to starting then periodically during therapy

- ◯ **Crohn Disease and Ulcerative Colitis:** Induction IV
  - ◯ ≤ 55 kg: 260mg IV as a single dose
  - ◯ 55 kg to 85 kg: 390mg IV as a single dose
  - ◯ >85 kg: 520 mg IV as a single dose
  - ◯ Maintenance SubQ dosing: 90 mg every 8 weeks

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

Date | Phone | Fax | Pager