

## Monoclonal Antibodies: Dupixent for Atopic Dermatitis

### Member Information

1. Last Name: \_\_\_\_\_ 2. First Name: \_\_\_\_\_  
3. Trillium ID #: \_\_\_\_\_ 4. Date of Birth: \_\_\_\_\_ 5. Gender: \_\_\_\_\_

### Prescriber Information

1. Prescriber Name: \_\_\_\_\_ 2. NPI #: \_\_\_\_\_  
3. Requestor Name (Nurse/Office Staff): \_\_\_\_\_  
4. Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
5. Phone #: \_\_\_\_\_ Ext. \_\_\_\_\_ Fax #: \_\_\_\_\_

### Drug Information

1. Drug Name: **Dupixent** 2. Strength: \_\_\_\_\_ 3. Quantity per 30 Days: \_\_\_\_\_  
4. Length of Therapy (in Days): ☐ up to 30 Days ☐ 60 Days ☐ 90 Days ☐ 120 Days ☐ 180 Days

### Clinical Information

#### Atopic Dermatitis: (Max Length of Therapy = 180 Days):

1. Is the member 6 years of age or older? ☐ Yes ☐ No  
2. Does the member have a diagnosis of moderate to severe Atopic Dermatitis? ☐ Yes ☐ No  
3. Has the member failed at least two prescription topical steroids? ☐ Yes ☐ No

#### Please List

4. Does the member have a documented adverse reaction or contraindication that precludes trial of at least 1 prescription topical steroids? ☐ Yes ☐ No **Please List Contraindications:** \_\_\_\_\_  
5. Does the member have a documented adverse reaction or contraindication that precludes trial of a topical calcineurin inhibitor (e.g., pimecrolimus (ages 2 and older) or tacrolimus 0.03% (ages 2 and older) and 0.1% (ages 18 and older)? ☐ Yes ☐ No **Please list Contraindications:** \_\_\_\_\_

#### For continuation of therapy, please answer questions 1-6

6. While on Dupixent, has the member had continued clinical benefit from baseline supported by medical records?  
☐ Yes ☐ No

**\*\* Please provide medical records documenting the member's clinical benefit from baseline\*\***

Signature of Prescriber: \_\_\_\_\_ Date: \_\_\_\_\_

**(Prescriber Signature Mandatory)**

I certify that the information provided is accurate and complete to the best of my knowledge, and I understand that any falsification, omission, or concealment of material fact may subject me to civil or criminal liability.