

Internal number:
 _____ / 20____ / _____

DRUG ORDER FORM

TO BE COMPLETED BY ORDERING PHYSICIAN	<p>TREATING PHYSICIAN (stamp): _____ / _____ / _____</p> <p>Name: _____</p> <p>Address: _____</p> <p>GLN Nr.: _____</p> <p>Tel-Nr. for inquiries: _____</p> <p>Billing address (if different from delivery address): _____</p> <p style="text-align: right; margin-top: 10px;">_____ Signature</p>
	<p>In the event of a necessary invoice correction, the additional costs will be invoiced at a flat rate.</p>
	<p>PATIENT:</p> <p>Surname/Given name: _____ <input type="checkbox"/> M / <input type="checkbox"/> F</p> <p>Migration background: <input type="checkbox"/> No / <input type="checkbox"/> Yes ⇒ Country of origin: _____</p> <p>Date of birth (DD/MM/YYYY): _____ / _____ / _____</p> <p>Body weight: _____ kg</p>
	<p>INDICATION / DIAGNOSIS: _____</p> <p>INFECTION (PROBABLY) ACQUIRED IN: _____</p>
	<p>ORDERED DRUG:</p> <p>_____</p>

Note on Praziquantel: Patients with migration background from countries endemic for neurocysticercosis should be screened by serology for the presence of asymptomatic infection before receiving praziquantel (-> risk to induce seizures in patients with asymptomatic infection) -> to order serology for 'Cysticercosis (*T. solium*)':

https://www.swisstph.ch/fileadmin/user_upload/SwissTPH/Institute/Travel_Medicine/Request_Form_English.pdf

Note on Primaquine: Primaquine can induce severe haemolysis in patients with G6PD-deficiency! -> Assessing G6PD-status before administering primaquine is mandatory (testing for G6PD is not available from the diagnostic laboratory of the Swiss TPH).

 **Send completed form via fax (061-284-8183) or via email (tropmed@swisstph.ch). Incompletely filled forms cannot be processed!**

TO BE COMPLETED BY SWISS TPH	<p>RECOMMENDED TREATMENT REGIMEN / DOSAGE: _____ / _____ / _____</p>
	<p style="text-align: right; margin-top: 10px;">_____ Signature</p>