(C1 esterase inhibitor)



CINRYZE infusion orders

Patient Name	DOB		
Phone		M	F

DIAGNOSIS Please provide ICD-10 code

D84.1 Defects in the complement system (C1 esterase inhibitor [C1-INH] deficiency)

(other)

PRE-MEDICATION

Tylenol 1000mg PO
Diphenhydramine 25mg PO
Cetirizine 10mg PO

Solu-Medrol 125mg IVP Solu-Cortef 100mg IVP Diphenhydramine 25mg IVP

(other) (other)

CINRYZE ORDERS

DOSAGE	PATIENT WEIGHT
1,000u IV every 3-4 days	lbs.
	kg

NOTES

ORDERING PROVIDER

Signature	X	Date
U		

Provider Phone Fax