

CASPOFUNGIN (CANCIDAS) ORDER FORM

HHS

Due to a limited number of systemic antifungal agents, the use of caspofungin may be necessitated in cases of invasive fungal infections where the patients are refractory to or intolerant of other therapies OR in those cases involving strains of fungi resistant to other therapies. Physicians are asked to evaluate usage for this patient and mark indication(s) listed below.

Indication: Please mark appropriate blank(s) below.

☐ 1. Treatment of invasive aspergillosis (defined as disease progression or failure to improve despite therapy for ³ 7 days with: amphotericin B or lipid forms of amphotericin B or itraconazole or investigational azole with reported Aspergillus activity, i.e., voriconazole) previously refractory to other antifungal therapy(ies)

☐ 2. Treatment of invasive aspergillosis in patients intolerant to previous antifungal therapy defined as: doubling of serum creatinine or serum creatinine ³ 2.5 mg/dL while on therapy or other acute reactions or infusion-related toxicity

☐ 3. Treatment of pulmonary disease with either definite invasive aspergillosis (defined as positive tissue histopathology or positive culture from tissue obtained by invasive procedure) OR probable invasive aspergillosis (defined as: positive radiographic or computed tomography evidence and supporting culture from bronchoalveolar lavage or sputum, galactomannan ELISA, and/or polymerase chain reaction)

☐ 4. Treatment of extrapulmonary disease with definite invasive aspergillosis as defined in "3"

☐ 5. Treatment of oropharyngeal candidiasis in patients previously refractory to or intolerant of other antifungal therapy(ies) [topical antifungal agents (clotrimazole, nystatin), oral fluconazole, or itraconazole] or in cases of azole-resistant strains of Candida that are not responsive to amphotericin B (oral suspension)

☐ 6. Treatment of esophagoscopy-proven esophageal candidiasis (candidal esophagitis) in patients previously refractory to or intolerant of other antifungal therapy(ies), including fluconazole, or in cases of azole-resistant strains of Candida that are not responsive to amphotericin B

Patient Name: _____

MD: _____

Medical Record #: _____

Date: _____

Caspofungin Dosage: _____

This form is not a permanent part of the medical record.