

Chart notes documenting trial and failure on the medication(s) listed above are required to be submitted to complete the review process.

- &RPSOH[SDWLHQW ZLWK WZR RU PRXUHUFIQUR G UFX J FRQG K L WJLKR Q VINV RM WDL ZLWK PHGLFDWLRQ FKDQJH 6SHFLI\ WKH DQG Attach Documentation / LJQLILFDQW DGY
- &OLQLFDO UDWLR Attach Documentation UHDWPHQW
- 3HUWLQHGW /DERUDWRU Attach copies of results QG 5HVXOWV

**** ALL CRITERIA LISTED BELOW MUST BE MET IN ORDER FOR THE FORMULARY EXCEPTION REQUEST TO BE APPROVED ****

- 7KHHTXHVWHG GUXJ LV)' \$ \$SSURYHG
- 7KHUH KDV EHHQ DQ DLOHTXD W IHDW O L DRU P X O V UPHD Q G D W R I D H a t o n UYH
- 0HPEHU KDV FRQWUDLQGLFDWLRQV WR Attach Documentation HUDQFH RI IRUPXOD
- 7KH UHTXHVWHG H[FHSWLRQ LV FRQVLGHUHJ WKH 6WDQG DUG RI & D W K H V DSSURSULDWH PHGLFDO VSHFLDOW\ D Q G H Z H S S M R X H Q D E O D W V O L F D E V O L W E B H G D J D L Q V W S O D F H E R D Q Attach Documentation Q D W L Y H W K H U D S \

Formulary Exception Request Form

- Request for Expedited (URGENT) Review:** % \ & KHFNLQJ WKL V ER [, FHUWLI\ WKDW DSSO\ LQJ WKH V KHDOWK RI WKH PHPEHU RU WKH PHPEHU \ V D E L O L W \ W R U H J D L Q P D [L P X P I X Q F W L F

Completed by: BBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBBB Date: BBBBBBBBBBBBBB BBBBBBBBBBBBBB

7KLV SURJUDP LV IXQGHBHQW SFDUWKEI\ 'W'KW U'RFVH URQ & ROXPELD 'HSDUWPHQW RI & DUH) LUVW % OXH & URVV + % O X H K B O O Q & R V P X Q L W R I & R O X P E L D L V D Q L Q G H S H Q G H Q W 6 K L H O G \$ V V R F L D W L R Q % / 8 (& 5 2 6 6 \$ % / 8 (+ , (' \$ D Q G W K H & U R V V D Q G 6 K L H O G 6 \ P E R D Q G % O X H 6 K L H O G \$ V V R F L D W L R Q S H O G H Q W R % D X W L & U R V V D Q G % O X H 6 K L H O

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