Perforomist
(formoterol fumarate) Inhalation Solution
20 mcg/2 mL vial

COVERED UNDER
NO RESTRICTIONS REGARDING PRIOR NEBULIZED SABA USE
MEDICARE PART B (J7606)

PHARMACIST: Please ***process as Part B*** with J-Code J7606.
(PERFOROMIST Inhalation Solution is a nebulized medication.)

Please attach this form to a standard prescription for PERFOROMIST Inhalation Solution

For Medicare Part B patients, please remember to:

- Ask if the patient has supplemental insurance (Medigap) and enter the information below
  - Supplemental insurance, if available, may cover all or part of the patient's out-of-pocket cost

ICD-10 Diagnosis codes appropriate for PERFOROMIST Inhalation Solution

COPD	Chronic Bronchitis	Emphysema
J44.9	J41.0XX, J41.8XX, J41.9XX, J42	J43.9XX

Patient's ICD-10 Code: _____

INSURANCE INFORMATION

Complete or fax a copy of the front and back of the patient's insurance card or face sheet with this form.

☐ Medicare ☐ Medicaid

ID No. _____

☐ **Supplemental insurance (Medigap)**

_____

ID No. _____ Group No. _____

Phone No. _____ Policyholder's Name *(if other than patient)* _____

☐ **Other insurance**

_____

ID No. _____ Group No. _____

Phone No. _____ Policyholder's Name *(if other than patient)* _____

Healthcare provider signature (required) _____ **Date (required)** _____

Please see Important Safety Information, including Boxed Warning, on the next page of this form. Please see the full Prescribing Information for PERFOROMIST, including Boxed Warning, at http://www.perforomist.com/-/media/perforomist/documents/perforomist_prescribing_information.pdf.

Important Safety Information

WARNING: ASTHMA-RELATED DEATH

Long-acting beta$_2$-adrenergic agonists (LABA) increase the risk of asthma-related death. Data from a large placebo-controlled US study that compared the safety of another long-acting beta$_2$-adrenergic agonist (salmeterol) or placebo added to usual asthma therapy showed an increase in asthma-related deaths in patients receiving salmeterol. This finding with salmeterol is considered a class effect of LABA, including formoterol, the active ingredient in PERFOROMIST® Inhalation Solution.

The safety and efficacy of PERFOROMIST in patients with asthma have not been established. All LABA, including PERFOROMIST, are contraindicated in patients with asthma without use of a long-term asthma control medication.

Indication

PERFOROMIST® (formoterol fumarate) Inhalation Solution is indicated for the long-term, twice-daily (morning and evening) administration in the maintenance treatment of bronchoconstriction in patients with chronic obstructive pulmonary disease (COPD), including chronic bronchitis and emphysema.

Important Limitations for Use:

- It is not indicated to treat acute deteriorations of COPD.
- It is not indicated to treat asthma. The safety and effectiveness of PERFOROMIST Inhalation Solution in asthma has not been established.

Important Safety Information

PERFOROMIST Inhalation Solution like other LABAs is contraindicated in patients with asthma without use of a long-term asthma control medication.

PERFOROMIST Inhalation Solution should not be initiated in patients with acutely deteriorating COPD, which may be a life-threatening condition.

PERFOROMIST Inhalation Solution should not be used for the relief of acute symptoms, i.e., as rescue therapy for the treatment of acute episodes of bronchospasm.

As with other inhaled beta$_2$-agonists, PERFOROMIST Inhalation Solution can produce paradoxical bronchospasm that may be life-threatening. If paradoxical bronchospasm occurs, PERFOROMIST Inhalation Solution should be discontinued immediately and alternative therapy instituted.

PERFOROMIST Inhalation Solution should not be used more often, at higher doses than recommended, or in conjunction with other inhaled, long-acting beta$_2$-agonists, as an overdose may result. Clinically significant cardiovascular effects and fatalities have been reported in association with excessive use of inhaled sympathomimetic drugs.

PERFOROMIST Inhalation Solution should be used with caution in patients with cardiovascular disorders, especially coronary insufficiency, cardiac arrhythmias and hypertension; in patients with convulsive disorders or thyrotoxicosis; and in patients who are unusually responsive to sympathomimetic amines.

PERFOROMIST Inhalation Solution, like other beta$_2$-agonists, can produce a clinically significant cardiovascular effect in some patients as measured by increases in pulse rate, systolic and/or diastolic blood pressure, and/or symptoms.

PERFOROMIST Inhalation Solution, like other sympathomimetic amines, should be used with caution. Doses of the related beta$_2$-agonist albuterol, when administered intravenously, have been reported to aggravate preexisting diabetes mellitus and ketoacidosis.

Beta agonist medications may produce significant hypokalemia in some patients, which has the potential to produce adverse cardiovascular effects. The decrease in serum potassium is usually transient, not requiring supplementation.

Immediate hypersensitivity reactions may occur after administration of PERFOROMIST Inhalation Solution, as demonstrated by cases of anaphylactic reactions, urticaria, angioedema, rash, and bronchospasm.

PERFOROMIST Inhalation Solution, as with other beta$_2$-agonists, should be used with extreme caution in patients being treated with monoamine oxidase inhibitors, tricyclic antidepressants, or drugs known to prolong the QTc interval because the action of adrenergic agonists on the cardiovascular system may be potentiated by these agents.

Beta-blockers and formoterol fumarate may inhibit the effect of each other when administered concurrently. Therefore, patients with COPD should not normally be treated with beta-blockers except under certain circumstances e.g., as prophylaxis after myocardial infarction, there may be no acceptable alternatives to the use of beta-blockers in patients with COPD.

Concomitant treatment with Xanthine derivatives, steroids, or diuretics may potentiate any hypokalemic effect of adrenergic agonists. The EKG changes and/or hypokalemia that may result from the administration of non-potassium sparing diuretics (such as loop or thiazide diuretics) can be acutely worsened by beta-agonists, so caution is advised in the coadministration.

The most common adverse reactions (≥2% and more common than placebo) with PERFOROMIST are diarrhea, nausea, nasopharyngitis, dry mouth, vomiting, dizziness, and insomnia.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

Mylan
Seeing is believing®

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01/2016 PER-2015-0095