Requesting clinician completes request form electronically

<http://mg.salisbury.nhs.uk/media/1064/ivig-clinicians-form.doc>

and email copy to

 shc-tr.SFTPharmacyHomecare@nhs.net

Request considered by Pharmacy against national Demand Management Plan (DMP) and associated guidelines

<http://igd.mdsas.com/clinical-info/>

Condition listed in **summary poster** as blue indication and criteria met <http://igd.mdsas.com/wp-content/uploads/Ig-PWG-Guidance-for-the-use-of-Ig-V1.3-12022019.pdf>

Condition not listed in **Summary poster** or listed in Summary poster as grey or **black**

Condition listed in **Summary poster** at

<http://igd.mdsas.com/wp-content/uploads/DemandManagementPoster_May2018.pdf>

as a red indication are recommended to receive IVIg in all cases n

 **Yes**

**Yes**

**Criteria not met**

Supply IVIg and inform IVIg panel by e-mailing anonymised copy of IVIg request form to medicinesadvice@uhs.nhs.uk

Refer to IVIg panel by e-mailing anonymised copy of IVIg request form to medicinesadvice@uhs.nhs.uk

**No**

Report all use of IVIg to the Regional Wessex Immunoglobulin Assessment Panel by e-mailing an anonymised copy of the request form to medicinesadvice@uhs.nhs.uk

Send e-mail from shc-tr.SFTPharmacyHomecare@nhs.net

Out of hours/Emergency request for IVIg – Follow this pathway. In cases where a delay in treatment is not possible for a grey indication or a blue indication (specified criteria not met), seek approval from 2 consultants (one looking after the patient) and a senior pharmacist before supplying IVIg.

using

**Yes**

Approved?

Supply made

Not supplied

Requesting clinician may consider appeal to IVIg panel