

**APPLICANT** (stamp or sticker acceptable)      **PATIENT NHI:** .....      **REFERRER** Reg No: .....

Reg No: .....      First Names: .....      First Names: .....

Name: .....      Surname: .....      Surname: .....

Address: .....      DOB: .....      Address: .....

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Fax Number: .....      Fax Number: .....

**Rituximab** (Mabthera)

**Initial application — arthritis - rheumatoid - TNF inhibitors contraindicated**

Applications from any relevant practitioner. Approvals valid for 4 months.

**Prerequisites**(tick boxes where appropriate)

- Treatment with a Tumour Necrosis Factor alpha inhibitor is contraindicated
- and  Patient has had rheumatoid arthritis (either confirmed by radiologic imaging, or the patient is CCP antibody positive)
- and  Disease has not responded to at least 3 months of methotrexate at a dose of at least 20 mg weekly or a maximum tolerated dose, unless contraindicated
- and  Disease has not responded to at least 3 months of methotrexate in combination with sulfasalazine and hydroxychloroquine sulphate (at maximum tolerated doses), unless contraindicated
- and  Disease has not responded to at least 3 months of methotrexate in combination with the maximum tolerated dose of ciclosporin, unless contraindicated
- or  Disease has not responded to at least 3 months of therapy at the maximum tolerated dose of leflunomide alone or in combination with methotrexate, unless contraindicated
- and  Patient has persistent symptoms of poorly controlled and active disease in at least 20 joints
- or  Patient has persistent symptoms of poorly controlled and active disease in at least 4 joints from the following: wrist, elbow, knee, ankle, shoulder, or hip
- and  Patient has CRP greater than 15 mg/L measured within one month before the application
- or  CRP not measured as patient is currently receiving prednisone therapy at a dose of greater than 5 mg per day received for more than 3 months
- and  Maximum of two 1000 mg infusions given two weeks apart

**Initial application — arthritis - rheumatoid - prior TNF inhibitor use**

Applications from any relevant practitioner. Approvals valid for 4 months.

**Prerequisites**(tick boxes where appropriate)

- Patient has had a Special Authority approval for etanercept or adalimumab for rheumatoid arthritis
- and  Patient has experienced intolerable side effects
- or  Following at least a 4 month trial of adalimumab or etanercept, the renewal criteria for rheumatoid arthritis were not met
- and  Maximum of two 1000 mg infusions given two weeks apart

I confirm the above details are correct and that in signing this form I understand I may be audited.

Signed: ..... Date: .....

Post application to Health New Zealand, Private Bag 3015, Wanganui – email: [customerservice@health.govt.nz](mailto:customerservice@health.govt.nz)

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**Rituximab** (Mabthera) - *continued*

**Renewal — arthritis - rheumatoid - re-treatment for people who have experienced a partial response to rituximab**

Current approval Number (if known):.....

Applications from any relevant practitioner. Approvals valid for 12 months.

**Prerequisites**(tick boxes where appropriate)

- Following the initial course of rituximab the patient experienced between a 30% and 50% decrease in active joint count from baseline
- or**
- Following the second course of rituximab the patient experienced at least a 50% decrease in active joint count from baseline
- or**
- Following the third and subsequent courses of rituximab, the patient experienced at least a continuing 30% improvement in active joint count from baseline

- and**  Rituximab re-treatment not to be given within 6 months of the previous course of treatment
- and**  Maximum of two 1000 mg infusions given two weeks apart

**Renewal — arthritis - rheumatoid - re-treatment for people who experience a response to rituximab**

Current approval Number (if known):.....

Applications from any relevant practitioner. Approvals valid for 12 months.

**Prerequisites**(tick boxes where appropriate)

- Following the initial course of rituximab infusions the patient experienced at least a 50% decrease in active joint count from baseline
- or**
- Following the second and subsequent courses of rituximab, the patient experienced at least a continuing 30% improvement in active joint count from baseline

- and**  Rituximab re-treatment not to be given within 6 months of the previous course of treatment
- and**  Maximum of two 1000 mg infusions per course given two weeks apart

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