

## Rutland Regional Medical Center – Infusion Services

The following list includes commonly administered medications in our infusion center and is not comprehensive. Medication not on the list? Contact the infusion referral team at 802.772.2416 to inquire if the medication can be administered at our center.

Order form(s) for our infusion center are found on our website: [www.RRMC.org/referrals](http://www.RRMC.org/referrals). Order forms can be faxed to 802.772.2545. *Please note, some order forms are medication specific*

Prior to scheduling the patient, our access management & pharmacy teams will be reviewing orders for medical necessity and prior authorization. If there are questions, somebody will reach out to the ordering provider's office.

Generic Name	Brand Name	J-Code	Comments
Abatacept	Orencia	J0129	
Alglucosidase Alfa	Lumizyme	J0221	
Alpha 1-proteinase Inhibitor	Prolastin-C	J0256	
Alteplase	Cathflo	36593	
Amikacin	---	J0278	
Benralizumab	Fasenra	J0517	
Burosumab	Crysvita	J0584	
Cabotegravir/rilpivirine	Cabenuva	J0741	
Calcium gluconate		J0611	
Ceftriaxone	Rocephin	J0696	
Certolizumab	Cimzia	J0717	
Cyanocobalamin	Vitamin B12	J3420	
Dalbavancin	Dalvance	J0875	

Generic Name	Brand Name	J-Code	Comments
Daptomycin	Cubicin	J0878	
Darbepoetin Alfa	Aranesp	J0881	
Denosumab 60 mg	Stoboclo**	Q5157	RRMC Preferred
	Prolia	J0897	Stoboclo is RRMC Preferred
Denosumab 120 mg	Osenvelt**	Q5157	RRMC Preferred
	Xgeva	J0897	Osenvelt is RRMC Preferred
Dupilumab	Dupixent	J3490	
Eculizumab	Soliris	J1300	
Efgartigimod Alfa	Vyvgart	J9332	
Epoetin Alfa	Retacrit**	Q5106	RRMC Preferred
	Procrit	J0885	Retacrit is RRMC Preferred
Ertapenem	Invanz	J1335	
Esketamine	Spravato	J0013	
Ferric Carboxymaltose	Injectafer	J1439	Non-preferred IV iron product
Ferric Derisomaltose	Monoferic	J1437	Non-preferred IV iron product
Ferumoxytol	Feraheme**	Q0138	RRMC Preferred
Fingolimod	Gilenya	J8499	
Gentamicin	---	J1580	
Golimumab	Simponi Aria	J1602	
Hydrocortisone	Solu-Cortef	J1720	

Generic Name	Brand Name	J-Code	Comments
Inclisiran	Leqvio	J1306	
Infliximab	Avsola**	Q5121	RRMC Preferred
	Inflectra	Q5103	
	Renflexis	Q5104	
	Remicade	J1745	
Iron Sucrose	Venofer	J1756	Feraheme is RRMC Preferred
IVIG	Privigen**	J1459	RRMC Preferred
	Gamunex	J1561	Privigen is RRMC Preferred
Lecanemab	Leqembi	J0174	
Magnesium Sulfate	---	J3475	
Mepolizumab	Nucala	J2182	
Methylprednisolone acetate	Depo-Medrol	J1040	
Methylprednisolone Sodium Succinate	Solumedrol	J2919	
Natalizumab	Tysabri	J2323	
Ocrelizumab	Ocrevus	J2350	
Omalizumab	Xolair	J2357	
Oritavancin	Orbactiv	J2407	
Pegfilgrastim	Fulphila	Q5108	RRMC Preferred
	Neulasta	J2506	Fulphila is RRMC Preferred
Rabies Vaccine	Rabavert		

Generic Name	Brand Name	J-Code	Comments
Razulizumab	Ultomiris	J3590	
Risankizumab	Skyrizi	J2327	
Rituximab	Ruxience**	Q5119	RRMC Preferred
	Rituxan	J9312	Ruxience is RRMC Preferred
Romosozumab	Evenity	J3111	
Sandostatin	Octreotide	J2353	
Somatuline Depot	Lanreotide	J1930	
Teprotumumab	Tepezza	J3241	
Testosterone Undecanoate	Aveed	J3145	
Tezepelumab	Tezspire	J2356	
Tocilizumab	Tyenne**	Q5135	RRMC Preferred
	Actemra	J3590	Tyenne is RRMC Preferred
Ustekinumab	Stelara	J3358	
Vedolizumab	Entyvio	J3380	
Zoledronic Acid	Reclast	J3489	
	Zometa	J3187	