Carglumic Acid
tablets for oral suspension 200 mg

Patient Referral Form

Phone: 888-991-1330
Fax: 855-813-2039

Please select one: ☐ **Newly prescribed patient** ☐ **Already on Carglumic Acid**

Patient Information *Please Print

Last Name: First Name:		SSN:	Sex: ☐ M ☐ F
Address:	City:	State:	Zip:
Phone Day #:	Evening #:	Cell #:	Preferred method of contact: ☐ Day ☐ Evening ☐ Cell
Email:			
Weight Lbs:	Kg:	Height:	BSA:
If Patient is a Minor, Guardian/Parent Name:		Relationship to Patient:	
Emergency Contact:		Phone #:	

Insurance Information

Primary Insurance Co. Name:		Phone #:
Policy Holder Name:	Policy #:	Group #:
Prescription Card Name:		Phone #:
Policy #:		Group #:
Secondary Insurance Co. Name:		Phone #:
Policy Holder Name:	Policy #:	Group #:

Physician Information

Prescriber Name/Title:		Phone #:	
NPI:	DEA:	Medicaid UPIN:	State License #:
Address:	City:	State:	Zip:
Name of Office Contact Person:		Office Contact Person Email:	
Office Contact Person Phone:		Office Contact Person Fax:	
PA Office Contact Name:		PA Office Contact Name:	

Prescription

Carglumic Acid Tablets for Oral Suspension, 200mg

SIG: Take ____ mg; equaling ____ tablets per day.
(to be divided into 2-4 doses per day)
QTY: ____ (30 day supply) Refills: ____
Mix ____ tablet(s) in a minimum of 2.5 mL of water per tablet and drink immediately before meals or feedings.
Take this dose ____ times per day.

Custom Dosing Instructions:

Medical Necessity

Please check applicable ICD-10 code: Therapy Start Date: _____

☐ **NAGS Deficiency (E72.20)** ☐ **Other**
☐ **NKDA**

Baseline Ammonia Level: _____ umol/L Test Date: _____
Clinical Impression: _____
Concurrent Medication: _____

☐ Allergies : ☐ NKDA

NY Medicaid Prescribers — Please submit the prescription on an original NY State prescription blank.

I certify I am prescribing Carglumic Acid for this patient for a medically necessary purpose. Date Written: _____

Dispense as written: _____
(Stamped Signatures Are Not Valid)

Substitution allowed: _____
(Stamped Signatures Are Not Valid)

This Prescription Form is only valid if FAXED to Anovo @855-813-2039

Continued on next page...

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Important Safety Information and Indications

- Carglumic Acid tablets are for oral suspension and must be mixed in water before taking. Carglumic acid should not be mixed in any food or liquid other than water.
- Do not swallow Carglumic Acid tablets whole.
- Do not crush Carglumic Acid tablets.
- Take Carglumic Acid right before meals or feedings.

Adverse Reactions

Most common adverse reactions are vomiting, abdominal pain, pyrexia, tonsillitis, anemia, diarrhea, ear infection, infections, nasopharyngitis, hemoglobin decreased, and headache.

These are not all the adverse reactions reported with Carglumic Acid.

You are encouraged to report negative side effects of prescription drugs to Eton Pharmaceuticals at 1-855-224-0233, or FDA at 1-800-FDA-1088, or visit www.fda.gov/safety/medwatch.

Please see the Full Prescribing Information, including Instructions for Use, for Carglumic Acid.

Indications

Carglumic acid tablets for oral suspension are indicated in pediatric and adult patients as:

- Adjunctive therapy to standard of care for the treatment of acute hyperammonemia due to N-acetylglutamate synthase (NAGS) deficiency.
- Maintenance therapy for the treatment of chronic hyperammonemia due to NAGS deficiency.

Please visit www.carglumicacid.com for more information.

Form: CARAC.RX.208
Revision:10/12/2026
1258-v8

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