## TALIMOGENE 10<sup>6</sup> PFU/ml for MELANOMA

## INITIAL PRESCRIPTION – FIRST ADMINISTRATION ONLY

Please Attach Addressograph						Patient Information Card		Ward
						Yes / No		
					(please circle)			
Pharmac	;y	Do not Remo	ove from the Manufac	cturers Packagin	g – Light	Sensitive Ger	netically Modif	ied Product
Time Remo		Time Dispensed	Disp By				Time Put in Pharmacy Fridge	
from Freezer			Checked By					
Date of Procedure	Dose	Route	Administration Volume				stration Dose Administered By e per Lesion	
	10 <sup>6</sup> PFU/ml	subcutaneous vo	Up to 4ml The total injection volume should not exceed 4ml per	Inject the larges first Prioritise injection remaining lesion	on of	More than 5cm – up to 4ml 2.5-5cm – up to 2ml		Sign
		lesions that are visible, palpable or detectable by ultrasound guidance	treatment session	on lesion size un maximum inject volume is reach	ntil the ion	1.5-2.5cm – u 0.5-1.5cm – u 0.5cm or less		Print
Prescriber	Sign	· · · · · · · · · · · · · · · · · · ·	Print	Pharma		gn	Pr	