Eptinezumab study for the acute treatment of migraine status in the ED

Dosing: single dose 300mg IV over 30minutes

(no other acute medication or IVF allowed for 2 hours post infusion unless medical urgency)

Questionnaire to be completed by ED physician

2 HR POST TREATMENT RESPONSE

(once completed, pls leave in Dr Florea's box)

If assessment at 2 hours post infusion was not possible for you, please indicate approximately how long after the infusion you assessed the patient:

1) Circle patient level of pain intensity : SEVERE MODERATE MILD ABSENT

2) What is the patient's subjective response to their treatment with eptinezumab:

☐ VERY MUCH BETTER	☐A LITTLE BETTER	☐MUCH WORSE
☐MUCH BETTER	☐NO CHANGE	☐VERY MUCH WORSE
	☐A LITTLE WORSE	

3) Is the patient's most bothersome migraine-associated symptom from baseline (nausea, photophobia or phonophobia) now absent? YES NO

4) Did your patient require additional rescue medication post infusion? YES NO

5) Did you consult a neurologist in the ED due to non response? YES NO

If the patient wishes to have a follow-up at the CHUM headache clinic in 3 months, advise the patient to immediately install the Canadian Migraine Tracker application (green and purple logo-free installation) to monitor their headaches until their first appointment.
If they prefer a paper format, please print and hand them a paper calendar to fill out migrainecanada.org/printable-migraine-diary-templates/

Sign the pre completed referral and leave in Dr Florea's box.