

# Arizona TPOXX Request Process for Healthcare Providers



Clinician diagnosis of confirmed or suspected mpox.



Identify if patient is [eligible](#) for STOMP Trial.

- Illness duration < 14 days AND at least 1 active lesion or proctitis
- No prior or concomitant TPOXX receipt

If eligible: visit <https://www.stomptpoxx.org/main> or call 855-876-9997.



If ineligible or unable to participate in STOMP, review [EA-IND eligibility](#) and then contact Arizona Poison & Drug Information System (APDIS) at 1-888-352-0540.

Be prepared to provide client information to establish [EA-IND eligibility](#). Expect to receive a call from ADHS medical personnel to confirm eligibility prior to drug dispensing.



Providers are responsible for completing required electronic forms through the [TPOXX IND Online Registry](#).

1. FDA Form 1572 - Only one per facility for all TPOXX prescribed. Return to CDC **within 7 calendar days** of starting treatment.
2. CDC [Informed Consent Form](#) - Obtain **PRIOR** to treatment.



Upon confirmation of eligibility **AND** ADHS medical personnel approval, APDIS will direct TPOXX to be dispensed to the provider either from the Arizona State Public Health Laboratory (ASPHL) or from a prepositioned inventory.



Patients treated and monitored for duration of treatment. Follow-up appointments should be on/around days 7 & 14 of treatment



Provider is responsible for completing remaining required EA-IND forms and returning them to CDC through the [TPOXX IND Online Registry](#) or via email ([regaffairs@cdc.gov](mailto:regaffairs@cdc.gov))

- CDC Patient Intake Form: Baseline assessment PRIOR to starting TPOXX. Submit **within 7 days** of treatment initiation.
- CDC Clinical Outcome Form: Progress and outcome information post treatment.
- [MedWatch Form](#): Report serious adverse events within 72 hours of awareness or sooner, if possible.



**\*Current as of 07/19/2024. Processes are subject to change.**