



How to prescribe **CeQur Simplicity™**

MEALTIME INSULIN **SIMPLIFIED™**

Prescribing using **KnippeRx** (effective 7/1/24)



Submit Rx for CeQur Simplicity™ 4-Day Patch and Inserter

- Prescribe “CeQur Simplicity 2U 4-Day, 8-Pack”
NDC/NRC: 73108-0000-08
- Prescribe “CeQur Simplicity Inserter”
NDC/NRC: 73108-0001-00

Pharmacy name:	KnippeRx Pharmacy
Pharmacy address:	1250 Patrol Rd, Charlestown, IN 47111
NCPDP/NABP#:	1568560
Pharmacy phone:	855-647-7379
Pharmacy fax:	833-434-1460



Submit Rx for vial of rapid-acting insulin to patient's preferred pharmacy

- CeQur Simplicity is labeled for use with Humalog® U-100 or NovoLog® U-100. Insulin sold separately



Initiate patient training and support

- Have the patient register with CeQur Cares™ by calling 1-888-55-CeQur (1-888-552-3787) or scanning the QR code
- A healthcare provider from your office or a CeQur healthcare professional will train the patient





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Prescribing using EMR (effective 7/1/24)



Step 1 Select CeQur Simplicity 2-Unit Patch, 8 Pack and select quantity (30-day or 90-day supply) and number of refills
NDC/NRC: 73108-0000-08



Step 3 Select a vial of rapid-acting insulin: Humalog® U-100 or NovoLog® U-100 (insulin sold separately)



Step 2 Select CeQur Simplicity Inserter
NDC/NRC: 73108-0001-00



Step 4 Submit the prescription to the patient's preferred pharmacy through your EMR

CeQur Simplicity Prescription Information

Product	Quantity	Directions	Refills
CeQur Simplicity™ 2U 4-Day NDC/NRC: 73108-0000-08	30-Day Supply 2-Unit Patch, 8-Pack, # of Boxes = 1 (Patient requires 180 units of rapid-acting insulin or less in 4 days)	Apply patch as directed Dose as directed 1 squeeze = 2 units	11
	2-Unit Patch, 8-Pack, # of Boxes = 2 (Patient requires > than 180 units of rapid-acting insulin in 4 days)		
CeQur Simplicity™ 2U 4-Day NDC/NRC: 73108-0000-08	90-Day Supply 2-Unit Patch, 8-Pack, # of Boxes = 3 (Patient requires 180 units of rapid-acting insulin or less in 4 days)	Apply patch as directed Dose as directed 1 squeeze = 2 units	3
	2-Unit Patch, 8-Pack, # of Boxes = 6 (Patient requires > than 180 units of rapid-acting insulin in 4 days)		
CeQur Simplicity™ Inserter NDC/NRC: 73108-0001-00	Inserter Kit 1 Inserter, Instructions for Use, and literature	Use as directed	N/A

Example Rx in EMR

Orders + DIAGNOSES & ORDERS Sign Orders

Ordering Provider

Supervising Provider

type II diabetes mellitus uncontrolled ⊕ ⊕ ⊗
E11.65 Type 2 diabetes mellitus with hyperglycemia

CeQur Simplicity 2 unit device ×

When 📅

Sig

Quantity Unit(s) refills DAW

Send to Example Pharmacy
1111 Example Rd, Anytown, State
 Ph. (123) 456-7890, Fax (123) 456-7890

Documentation only

Note to facility

Internal note

Patient notification Send patient text messages for this prescription 🔔

Questions?
Contact your local CeQur representative

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Rep name:

Rep email:

Rep phone: