Nirmatrelvir/Ritonavir (Paxlovid®) Practitioner Prescription

(Outpatient Treatment in COVID-19 Patients)

This practitioner prescription can be used when prescribing Paxlovid to patients. It confirms that key eligibility criteria were confirmed and conversations with patients have taken place. It can also be used as a companion sheet to send along with your EMR-generated prescription to let the pharmacist know you are addressing interactions and eligibility.

PATIENT INFORMATION						
Patient Name		Persona	Personal Health Number		Date of Birth (YYYY / MM / DD)	
						1
Address		l .	City			Postal Code
Phone Number					<u> </u>	
Date of Symptom Onset (YYYY / MM / DD)						
ELIGIBILITY CRITERIA - see page 2 for de	tails					
☐ Confirmed COVID-19 AND	cans					
Symptomatic for five days or le	ss (symptor	n onset day is conside	ered day zero)			
Unvaccinated or have received one dose of a COVID-19 vaccine and are:						
Age 55 and older						
Indigenous, a		ler				
Age 18 - 54 with a pre-existing health condition						
Pregnant						
Immunocompromised	(vaccinate	d or unvaccinated)				
Living in long-term car	e or design	ated supportive living	g, regardless o	of age or vaccir	ne status	
No exclusion criteria (refer to b	ack of pres	cription for details)				
Drug-drug interactions assessed	d using bes	t possible medicatio	n history (sel	lect one below	w):	
No serious drug-drug inte	eractions id	lentified				
Interactions identified and management plan implemented (please describe below):						
Risk benefit ratio is in favour of prescribing Paxlovid						
Other notes for pharmacist:						
Assessment completed by pharmacist (if applicable) Pharmacist Name:						
PRESCRIPTION						
eGFR greater than or equal to 6	O mol /main m	irmatrolyir/ritonavir 1	200/100 ma (D	lavlavid) DO DI	D.v.E.dave	
eGrk greater than or equal to o	O INL/ININ N	iiimatreivii/iitonavii 3	ou/ rou mg (P	axioviu) PO bii	D X 5 days	
eGFR 30-59 mL/min nirmatrelvi (pharmacist to remove 10 table				ays		
Physician Signature		Physician Name (Print)			Date Signed	
		CPSA License Number				
FAX INFORMATION - Fax this prescripti	on directly	to the pharmacy inste	ead of giving it	t to your patie	nt to take in.	
Pharmacy Name	Pharmacy Fax		If this fax is re			ns for the prescriber,
		please call:				

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Treatments are available for patients who have a confirmed COVID-19 infection if they can receive the treatment within five days of symptom onset for Paxlovid and they are:

- Unvaccinated individuals or have received one dose of a COVID-19 vaccine and are:
 - o Age 55 and older
 - o Indigenous, age 45 or older
 - o Age 18 54 with a pre-existing health condition including:
 - diabetes (taking medication for treatment)
 - obesity (BMI>30)
 - chronic kidney disease (estimated glomerular filtration rate, <60 ml per minute per 1.73 m2 of body-surface area)
 - congestive heart failure (New York Heart Assocation class II, III or IV)
 - > chronic obstructive pulmonary disease, and modertate-to-severe asthma
 - o Pregnant
- Immunocompromised (vaccinated or unvaccinated), due to reasons included but not limited to:
 - o have received a transplant
 - o is an oncology patient who has received a dose of any IV or oral chemotherapy or other immunosuppressive treatment since December 2020
 - o has an inflammatory condition (e.g. rheumatoid arthritis, lupus, inflammatory bowel disease) receiving a dose of any systemic immunosuppressive treatment since December 2020
- Living in long-term care or designated supportive living, regardless of age or vaccine status

To be eligible, patient has none of the exclusion criteria listed below:

- Hypersensitivity to components of Paxlovid
- Pulmonary hypertension
- TB
- Some transplants (solid organ transplant on unmanageable absolutely contraindicated drug at any time and allogenic stem cell transplants within first 3 months)
- eGFR <30ml/min/1.73m²

Paxlovid Resources:

https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-paxlovid-clinical-resource-guide.pdf

https://www.covid19-druginteractions.org/

For list of pharmacies that dispense Paxlovid, visit https://www.ab.bluecross.ca/news/covid-19-immunization-program-information.php

Patients who are symptomatic and have received a prescription for Paxlovid should not pick up their prescription inperson, and instead have a family member pick it up or have it delivered.