

Paxlovid Checklist Tool for Prescribers

The National Institute of Health (NIH) COVID-19 Treatment Guidelines recommends ritonavir-boosted nirmatrelvir (Paxlovid), as the preferred treatment for most high-risk, non-hospitalized patients with mild to moderate COVID-19. Paxlovid is currently free for all eligible patients. Visit [covid19treatmentguidelines.nih.gov/management/clinical-management/nonhospitalized-adults--therapeutic-management/](https://www.covid19treatmentguidelines.nih.gov/management/clinical-management/nonhospitalized-adults--therapeutic-management/) to read the guidelines.

Eligibility Criteria

The Food and Drug Administration (FDA) has issued an emergency use authorization (EUA) for Paxlovid for the treatment of COVID-19 in individuals who meet all the following criteria:

- Test positive for COVID-19 on a nucleic acid amplification (NAA) or antigen test, including an FDA-authorized home-test kit
 - Are age 12 or older and weigh at least 88 pounds (40 kilograms)
 - Are age 65 or older or have a medical condition or other factor that increases their risk for severe COVID-19. More information on underlying medical conditions can be found by visiting [cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html](https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html).
 - Have mild to moderate COVID-19 symptoms
 - Can start treatment within five days of symptom onset
 - Are not hospitalized due to COVID-19 when treatment is initiated
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Drug Interactions to Review Prior to Prescribing Paxlovid

Co-administration of Paxlovid can alter the plasma concentrations of other drugs, and other drugs may alter the plasma concentrations of Paxlovid.

- Carefully review concomitant medications, including over-the-counter medicines, herbal supplements, and recreational drugs, to evaluate the potential for drug-drug interactions.
- Important drug-drug interactions with Paxlovid:
 - Ritonavir can increase concentrations of certain drugs that are highly dependent on CYP3A4 for clearance, increasing the potential for drug toxicities.
 - Drugs that induce CYP3A4 (such as rifampin) can lead to significant reductions in nirmatrelvir and ritonavir concentrations, which may decrease the therapeutic effect of Paxlovid.
 - Refer to the Paxlovid EUA Fact Sheet for Healthcare Providers (Sections 4 and 7) and the NIH Treatment Guidelines on Potential Paxlovid Drug-Drug Interactions for details on identifying and managing drug-drug interactions. To read the fact sheet, visit [fda.gov/media/155051/download](https://www.fda.gov/media/155051/download).
 - For additional decision support, access the University of Liverpool's COVID-19 Drug Interactions Checker by visiting [covid19-druginteractions.org/checker](https://www.covid19-druginteractions.org/checker).
- Hormonal contraceptives:
 - Patients on combined hormonal contraceptives (i.e., ethinyl estradiol) should use an effective alternative contraceptive method or an additional barrier method, or not have sexual activity during treatment with Paxlovid.
- Patients on ritonavir- or cobicistat-containing HIV or HCV regimens should continue their treatment as indicated.

Information to Review Prior to Prescribing

- ☑ Health care practitioners must communicate information consistent with the EUA Fact Sheet for Patients, Parents, and Caregivers and provide them with a paper or electronic copy prior to administration of Paxlovid. Access the fact sheet at [fda.gov/media/155051/download](https://www.fda.gov/media/155051/download).
- ☑ Important prescribing instructions:
 - Prescriptions should specify the numeric dose of each active ingredient within Paxlovid: 300 mg nirmatrelvir (two 150 mg tablets) with 100 mg ritonavir (one 100 mg tablet), with all three tablets taken together twice daily for five days.
- ☑ Dosing information in patients with renal impairment:
 - Mild renal impairment (eGFR \geq 60 to $<$ 90ml/min): No dosage adjustment needed.
 - Moderate renal impairment (eGFR \geq 30 to $<$ 60ml/min): Reduce dosage to 150 mg nirmatrelvir (one 150 mg tablet) with 100 mg ritonavir (one 100 mg tablet) taken together twice daily for five days.
 - More information on renal dosing can be found by visiting [fda.gov/media/155071/download](https://www.fda.gov/media/155071/download).
 - Severe kidney impairment (eGFR $<$ 30 mL/min): Paxlovid is not recommended. To learn more about alternative treatments, visit [nyc.gov/health/covidprovidertreatments](https://www.nyc.gov/health/covidprovidertreatments).
- ☑ Use in patients with hepatic impairment:
 - Mild (Child-Pugh Class A) to moderate (Child-Pugh Class B) liver impairment: No dosage adjustment needed.
 - Severe liver impairment (Child-Pugh Class C): Therapy is not recommended.

Additional Prescribing Information For Home Delivery

Paxlovid can be prescribed in New York City through Alto Pharmacy, who will deliver to the patient's preferred address at no cost. Visit [nyc.gov/health/covidprovidertreatments](https://www.nyc.gov/health/covidprovidertreatments) for detailed instructions. Other pharmacies that have Paxlovid in stock can be found on the COVID-19 Therapeutics Locator at covid-19-therapeutics-locator-dhhs.hub.arcgis.com.

- ☑ Before sending the prescription, verify the patient's phone number and address for delivery.
- ☑ In the note for pharmacist section, indicate the patient's date of symptom onset.
- ☑ Submit e-prescription to Alto Pharmacy. Prescriptions can also be sent by phone at 800-874-5881, or by fax at 415-484-7058.
- ☑ Advise patient that they will receive a call or text message from the pharmacy (800-874-5881) and they must respond to schedule the delivery.
- ☑ Contact Alto Pharmacy at 800-874-5881 for questions on medicine interactions or other concerns.