

## ISC LRRCN community process for the eligibility and prescribing of therapeutic outpatient management of COVID-19

### Key messages:

- A positive COVID-19 test (preferably by PCR and alternatively by rapid antigen test) is required as part of eligibility.
- LRRCN community members who meet the eligibility criteria can call their nursing stations (Fox Lake, Garden River and John D'Or Prairie) to make an appointment to come into the nursing station. A health professional will discuss next steps in order to confirm eligibility and arrange for getting the most appropriate COVID-19 treatment for them (if criteria is met).
- Therapeutic management may have many drug interactions and medical contraindications that prescribers must be aware of. Prescribers will work alongside the FNIHB pharmacist who must assess each prescription against these drug interactions and medical contraindications.

### What are the available therapeutic treatments for COVID-19?

#### FIRST LINE

- **Paxlovid™** (nirmatrelvir tablets; ritonavir tablets) is indicated for the treatment of mild-to-moderate coronavirus disease 2019 (COVID-19) in adults with positive results of direct severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) viral testing, and who are at high risk for progression to severe COVID-19, including hospitalization or death.

Paxlovid™ is not approved for any of the following:

- For pre-exposure or post-exposure prophylaxis for prevention of COVID-19.
- For use for longer than 5 consecutive days.
- For use in clients less than 18 years of age.
- In clients with severe renal impairment (eGFR <30 mL/min).
- In clients with severe hepatic impairment.
- Who require an increase in baseline oxygen flow rate due to COVID-19 (those on chronic oxygen therapy due to underlying non-COVID-19 related comorbidities)



<b>SECOND LINE</b>	<p>1. <b>Remdesivir</b> is indicated for the treatment of COVID-19 in adults and adolescents (aged 18 years and older with body weight at least 40kg) with mild to moderate COVID-19 symptoms who are at high risk for progressing to hospitalization and/or death.</p> <p>Remdesivir is <u>not</u> approved for any of the following:</p> <ul style="list-style-type: none"> <li>• For pre-exposure or post-exposure prophylaxis for prevention of COVID-19.</li> <li>• For use in clients less than 18 years of age (as per current guidance)</li> <li>• For use in clients with severe renal impairment (eGFR &lt;30 mL/min) – (as per current guidance)</li> <li>• For use in clients with severe hepatic impairment</li> <li>• Who require an increase in baseline oxygen flow rate due to COVID-19 (those on chronic oxygen therapy due to underlying non-COVID-19 related comorbidities)</li> </ul>
<b>ADDITIONAL CONSIDERATIONS FOR THERAPY</b>	<p>1. <b>Sotrovimab</b> is indicated for the treatment of mild to moderate coronavirus disease 2019 (COVID-19), confirmed by direct SARS-CoV-2 viral testing, in adults and adolescents (12 years of age and older weighing at least 40 kg) who are at high risk for progressing to hospitalization and/or death.</p> <p>Sotrovimab is <u>not</u> approved for any of the following:</p> <ul style="list-style-type: none"> <li>• For pre-exposure or post-exposure prophylaxis for prevention of COVID-19.</li> <li>• For use in clients less than 12 years of age.</li> <li>• Clients positive for the BA.2 COVID sub variant.</li> <li>• Who require an increase in baseline oxygen flow rate due to COVID-19 (those on chronic oxygen therapy due to underlying non-COVID-19 related comorbidities)</li> </ul>



## CHECKLIST:

### 1. Confirm COVID-19 Diagnosis

- Has the client called or presented at the nursing station with potential symptoms of COVID-19?
  - **Infection should be confirmed before initiating treatment, ideally by RT-PCR testing.**
- (RT PCR) positive test Yes ☐ No ☐
  - If a PCR test is not possible or if results would not be available until more than 5 days (7 days for remdesivir) from symptom onset, rapid antigen tests (RAT) may be used.
- Rapid Antigen Test (RAT) positive Yes ☐ No ☐
  - If a RAT is completed by the patient at home, it must be repeated at nursing station prior to prescribing of any therapeutic treatment by the available testing mechanism.
  - If the RAT is used, a PCR test is to be sent to either AHS or another LRRCN facility where PCR testing is available.
- Within 7 days of symptom onset Yes ☐ No ☐ **(Remdesivir Only)**
- Within 5 days of symptom onset Yes ☐ No ☐ **(Paxlovid, Remdesivir or Sotrovimab)**

### 2. Check Client Eligibility for Paxlovid™ (First Line Medication)

**POSITIVE COVID-19 TEST (PCR or RAT if PCR not available) AND meet criteria for either A or B below:**

**A. UNVACCINATED (no vaccination and/or one dose of mRNA vaccine) AND are:**

- age 40 and older (45 and older with AHS)
- OR
- age 18 and older with a pre-existing health condition including
    - diabetes (taking medication for treatment);
    - obesity (BMI >30);
    - congestive heart failure (New York Heart Association class II, III, or IV);
    - chronic obstructive pulmonary disease and moderate-to-severe asthma;
    - chronic kidney disease (estimated glomerular filtration rate, <60 ml per minute per 1.73 m<sup>2</sup> of body-surface area) **\*dosage reduction required per product monograph**

OR

- age 18 years or older and immunocompromised, due to one of the following reasons:
  - is an oncology patient who has received a dose of any IV or oral chemotherapy or other immunosuppressive treatment since December 2020;
  - has an inflammatory condition (such as rheumatoid arthritis, lupus or inflammatory bowel disease) and has been receiving a dose of any systemic immunosuppressive treatment since December 2020.

OR

- pregnant (NP to consult with Obstetrics) – must be 18 years or older to be considered



## A. VACCINATED

- patient has had 2 doses of 2 dose series (Moderna/Pfizer) with or without additional boosters.
- patient has had 1 dose of 1 dose series Johnson and Johnson) with or without additional boosters.

### AND are:

- **age 70** and older (AHS does not have this criteria)

OR

- **age 40** and older (AHS does not have this criteria) 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 Association class II, III, or IV);
  - chronic obstructive pulmonary disease and moderate-to-severe asthma;

OR

- **age 18** and older who is **immunocompromised** due to one of the following reasons:
  - has received a transplant;
  - is an oncology patient who has received a dose of any IV or oral chemotherapy or other immunosuppressive treatment since December 2020;
  - has an inflammatory condition (such as rheumatoid arthritis, lupus or inflammatory bowel disease) and has been receiving a dose of any systemic immunosuppressive treatment since December 2020.

**\*Transplant patients will be considered for remdesivir or sotrovimab therapy due to drug interactions with Paxlovid™.**

## 3. Drug Interactions and Eligibility Criteria for Paxlovid

- Given the numerous significant and serious drug interactions with Paxlovid, a thorough medication history must be conducted by a qualified health care provider for each client before prescribing and dispensing Paxlovid.

### 1. Thorough medication history completed by the prescriber (or Health Care Professional and provided to the prescriber)

Yes ☐ No ☐ If no, not eligible for treatment - proceed to calling RAAPID (Step 4)

### 2. Drug Interaction Check completed:

- Collaboration with prescriber and FNIHB Pharmacist (or local pharmacy if FNIHB Pharmacist not available) to complete Drug Interaction Check

Yes ☐ No ☐ If no, not eligible for treatment – proceed to calling RAAPID (Step 4)

- If drug interactions identified, were any contraindications for Paxlovid?

Yes ☐ If yes, not eligible for treatment – proceed to call RAAPID (Step 4)

No ☐ If no, make sure drug interactions are documented in patient chart.



### 3. Assessment of Kidney Function (check all that apply)

- History of kidney disease ☐
- History of elevated creatinine clearance ☐ (verified through Netcare)
- Currently on medications that may cause nephrotoxicity ☐

If any boxes are checked, patient will require the renal adjusted dose of Paxlovid™ .  
Renal adjusted doses will be available in all nursing stations.

- If patient eligible for Paxlovid, proceed to dispensing of medication as per prescriber's order.
- Skip to step 7 (Monitoring and Reporting)
- If patient is not eligible for Paxlovid, proceed to step 4.

### 4. Nurse Practitioner (NP) to call RAAPID for consult with the COVID Outpatient Treatment Program.

**AHS INCLUSION CRITERIA MAY DIFFER FROM ISC GUIDANCE DOCUMENTS**

#### • Lab Results Available:

- ☐ eGFR \_\_\_\_\_ (date)
- ☐ Hepatic ALT \_\_\_\_\_ (date)
- ☐ Prothrombin Time \_\_\_\_\_ (date)

#### • Ask about patient history (as per step 3.3):

- Liver Disease
- Kidney Disease
- For Liver Transplant patients, consult with transplant physician

### 5. If Client is to be transferred to AHS Facility:

**PATIENT WILL NEED TO MEET ALL AHS CRITERIA TO BE ACCEPTED FOR REMDESIVIR/SOTROVIMAB AT AN AHS FACILITY**

- Prescriber to provide HCP guidance on preparing the client for transport to AHS facility.
- Follow current processes for transfer to AHS.

### 6. If client is unable to transfer to AHS facility, medication is available in the nursing station and can be administered in community:

- Prescriber to determine appropriate treatment (based on assessment and labwork)
- If medication is delivered in community, ensure appropriate consents are obtained and signed by the patient.

**Remdesivir** will be considered next as it is the second line medication.

- A. **POSITIVE COVID-19 TEST** (PCR or RAT if PCR not available) AND either B or C:
- B. **UNVACCINATED** (no vaccination and/or one dose of mRNA vaccine) AND are:
- C. **age 40** and older (45 and older with AHS)  
OR
- D. **age 18** and older with a **pre-existing health condition** including
  - a. diabetes (taking medication for treatment);

- b. obesity (BMI >30);
- c. chronic kidney disease (estimated glomerular filtration rate, <60 ml per minute per 1.73 m<sup>2</sup> of body-surface area);
- d. congestive heart failure (New York Heart Association class II, III, or IV);
- e. chronic obstructive pulmonary disease and moderate-to-severe asthma;

OR

- E. **age 18** years or older and **immunocompromised**, due to one of the following reasons:
  - a. has received a transplant
  - b. is an oncology patient who has received a dose of any IV or oral chemotherapy or other immunosuppressive treatment since December 2020;
  - c. has an inflammatory condition (such as rheumatoid arthritis, lupus or inflammatory bowel disease) and has been receiving a dose of any systemic immunosuppressive treatment since December 2020.

OR

- F. **pregnant** (NP to consult with Obstetrics and referred to High Level for infusion)

**OR**

## **B. VACCINATED**

- o patient has had 2 doses of 2 dose series (Moderna/Pfizer) with or without additional boosters.
- a. patient has had 1 dose of 1 dose series Johnson and Johnson) with or without additional boosters.

**AND are:**

- G. **age 70** and older (AHS does not have this criteria)

OR

- H. **age 40** and older (AHS does not have this criteria) with a **pre-existing health condition** including:

- a. diabetes (taking medication for treatment);
- b. obesity (BMI >30);
- c. chronic kidney disease (estimated glomerular filtration rate, <60 ml per minute per 1.73 m<sup>2</sup> of body-surface area);
- d. congestive heart failure (New York Heart Association class II, III, or IV);
- e. chronic obstructive pulmonary disease and moderate-to-severe asthma;

OR

- I. **age 18** and older who is **immunocompromised** due to one of the following reasons:
  - a. has received a transplant;
  - b. is an oncology patient who has received a dose of any IV or oral chemotherapy or other immunosuppressive treatment since December 2020;
  - c. has an inflammatory condition (such as rheumatoid arthritis, lupus or inflammatory bowel disease) and has been receiving a dose of any systemic immunosuppressive treatment since December 2020.

**For Clients with severe renal impairment, or for use against future variants, Sotrovimab may be considered.**

**Sotrovimab** may be considered in exceptional circumstances.

- A. **POSITIVE COVID-19 TEST** (PCR or RAT if PCR not available) **AND** either B or C:

- B. **UNVACCINATED** (no vaccination and/or one dose of mRNA vaccine) **AND** are:

- C. **age 40** and older (45 and older with AHS)

OR

- D. **age 12** and older (18 and older with AHS) (with consult by NP to FNIHB MOH and Pediatric Infection Disease) with a pre-existing health condition including
- E. with a pre-existing health condition including:
  - a. diabetes (taking medication for treatment);
  - b. obesity (BMI >30);
  - c. chronic kidney disease (estimated glomerular filtration rate, <60 ml per minute per 1.73 m<sup>2</sup> of body-surface area);
  - d. congestive heart failure (New York Heart Association class II, III, or IV);
  - e. chronic obstructive pulmonary disease and moderate-to-severe asthma;
- OR
- F. **age 12** years or older and immunocompromised, due to one of the following reasons:
  - a. has received a transplant
  - b. is an oncology patient who has received a dose of any IV or oral chemotherapy or other immunosuppressive treatment since December 2020;
  - c. has an inflammatory condition (such as rheumatoid arthritis, lupus or inflammatory bowel disease) and has been receiving a dose of any systemic immunosuppressive treatment since December 2020.
- OR
- G. **pregnant** (NP to consult with Obstetrics and referred to High Level for infusion)

**OR**

**C. VACCINATED**

- o patient has had 2 doses of 2 dose series (Moderna/Pfizer) with or without additional boosters.
- a. patient has had 1 dose of 1 dose series Johnson and Johnson) with or without additional boosters.

**AND** are:

- H. **age 70** and older (AHS does not have this criteria)
- OR
- I. **age 40** and older (AHS does not have this criteria) with a **pre-existing health condition** including:
  - a. diabetes (taking medication for treatment);
  - b. obesity (BMI >30);
  - c. chronic kidney disease (estimated glomerular filtration rate, <60 ml per minute per 1.73 m<sup>2</sup> of body-surface area);
  - d. congestive heart failure (New York Heart Association class II, III, or IV);
  - e. chronic obstructive pulmonary disease and moderate-to-severe asthma;
- OR
- J. **age 12** and older (with consult by NP to FNIHB MOH and Pediatric Infection Disease) who is **immunocompromised** due to one of the following reasons:
  - a. has received a transplant; is an oncology patient who has received a dose of any IV or oral chemotherapy or other immunosuppressive treatment since December 2020;
  - b. has an inflammatory condition (such as rheumatoid arthritis, lupus or inflammatory bowel disease) and has been receiving a dose of any systemic immunosuppressive treatment since December 2020.

## 7. Monitoring and Reporting

- ☐ FAX prescription to Pharmasave in Ft Vermillion to be entered into Netcare (+1 (780) 927-4568).
- ☐ Email Jacqueline Ming at [jacqueline.ming@sac-isc.gc.ca](mailto:jacqueline.ming@sac-isc.gc.ca) if a dose is prescribed and dispensed.

- Renal adjusted packages will be available in all nursing stations. These packages will be marked and have been adjusted by Jacqueline Ming.
- Training video is available on the OneHealth website. Training for both health care providers and nurse practitioners is available. The videos were created prior to some updates. Ensure most current guidelines are used.
- Medication-related incidents must be reported using FNIHB AB Occurrence Reporting Form (found on OneHealth).

**Please make sure if a Rapid Antigen Test is used to confirm COVID, a PCR test must be performed and sent to either AHS or another LRRCN facility where PCR testing is available. This will make sure the tests are documented in our COVID database.**

DRAFT

