VIRGINIA PAXLOVID Patient Eligibility Screening Checklist Tool for Pharmacists

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On July 6th, the FDA made additional revisions to the EUA, to authorize state-licensed pharmacists to prescribe Paxlovid, with certain limitations to ensure appropriate patient assessment and prescribing. *This form may be completed by the prescribing pharmacist to assist in determining patient eligibility for Paxlovid (nirmatrelvir/ritonavir). This checklist is not a requirement, however, it will help pharmacists understand the currently available evidence, resources, information, emergency use authorization (EUA) requirements and expert opinions. This checklist is subject to change.*

Prescribing Pharmacist Name: _____ Date and time of prescription: _____
Patient name: _____ Patient Date of Birth: _____

When testing positive for COVID-19, patients should first consider seeking care from their regular health care provider or locating a Test-to-Treat site in their area.

RESPONSIBILITY OF PATIENTS:

- ☐ Provide electronic or printed health records less than 12 months old, including the most recent reports of laboratory blood work for the state-licensed pharmacist to review for kidney or liver problems. (State-licensed pharmacists could also receive this information through a consult with the patient's health care provider.)
- ☐ Provide a list of all medications they are taking, including over-the-counter medications.

DETERMINING PATIENT ELIGIBILITY

- ☐ Positive SARS-CoV-2 test (Confirmation of a positive home rapid SARS-CoV-2 test result with additional direct SARS-CoV-2 viral testing is not required.)
- ☐ Age ≥ 12 years of age and weighing at least 40 kg (88lbs)
- ☐ Has one or more risk factors for progression to severe COVID-19 (Healthcare providers should consider the benefit-risk for an individual patient.)
- ☐ Symptoms consistent with mild to moderate COVID-19
    - Symptoms may include: Cough, shortness of breath or difficulty breathing, fever, chills, muscle pain, sore throat, GI symptoms, diarrhea
- ☐ Symptom onset within 5 days
- ☐ Not requiring hospitalization due to severe or critical COVID-19 at treatment initiation
- ☐ No known or suspected severe renal impairment (eGFR < 30 mL/min)
    - Note that a dose reduction is required for patients with moderate renal impairment (eGFR ≥30-<60 mL/min); see the Fact Sheet for Healthcare Providers.
    - Prescriber may rely on patient history and access to the patient's health records to make an assessment regarding the likelihood of renal impairment. Providers may consider ordering a serum creatinine or calculating the estimated glomerular filtration rate (eGFR) for certain patients after assessment on a case-by-case basis based on history or exam.
- ☐ No known or suspected severe hepatic impairment (Child-Pugh Class C)

- ☐ No history of clinically significant hypersensitivity reactions [e.g., toxic epidermal necrolysis (TEN) or Stevens-Johnson syndrome] to the active ingredients (nirmatrelvir or ritonavir) or other components of the product

Pharmacists should refer patients for a clinical evaluation with a prescriber if any of the following apply:

- ☐ Sufficient information is not available to assess renal and hepatic function.
- ☐ Sufficient information is not available to assess for a potential drug interaction.
- ☐ Modification of other medications is needed due to a potential drug interaction.
- ☐ Paxlovid is not an appropriate therapeutic option based on the current Fact Sheet for Healthcare Providers or due to potential drug interactions for which recommended monitoring would not be feasible.