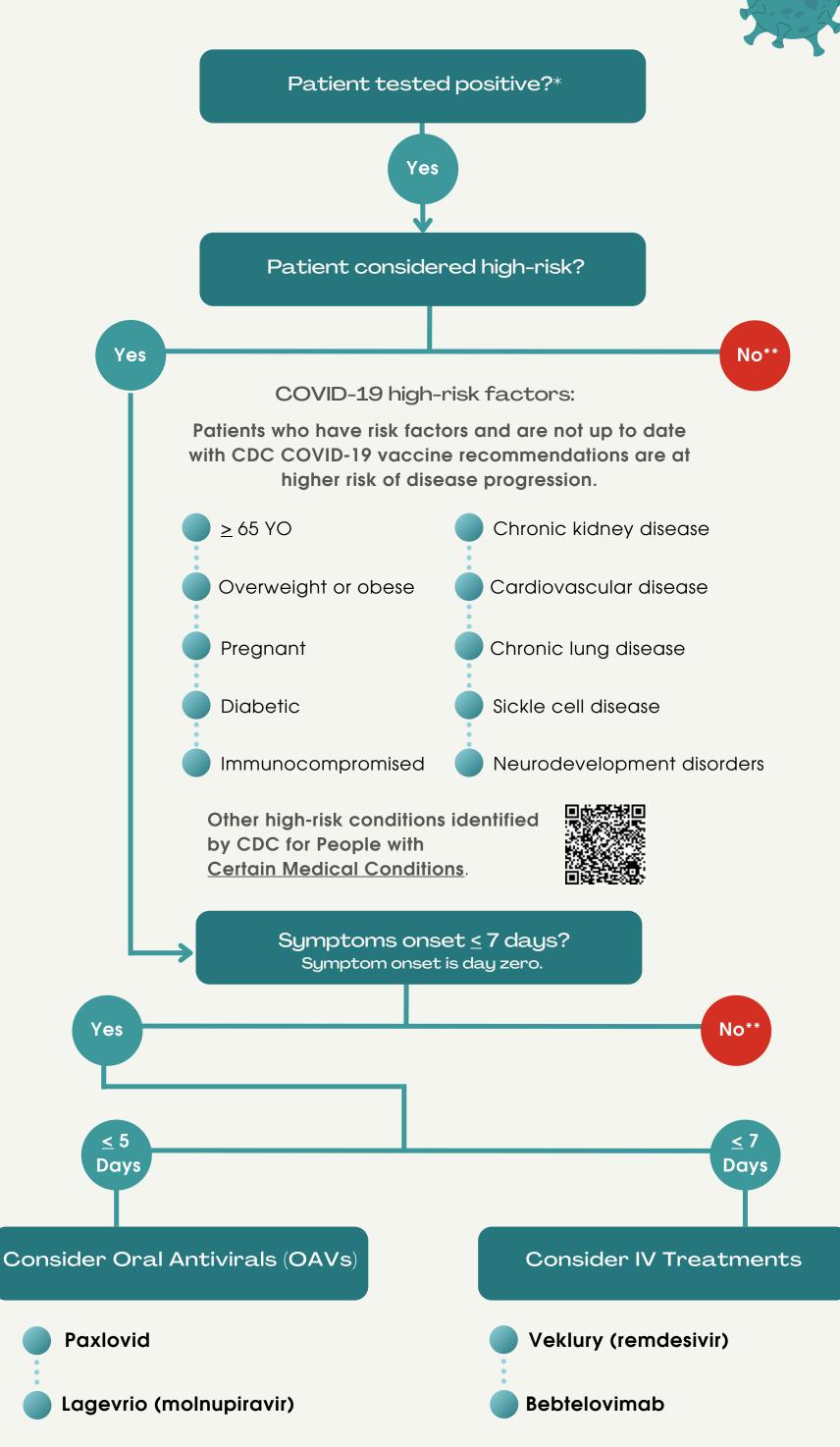
## COVID-19 Outpatient Therapeutics Guidelines

For adult or pediatric patients with mild to moderate COVID-19 and at high-risk for progression to severe disease.

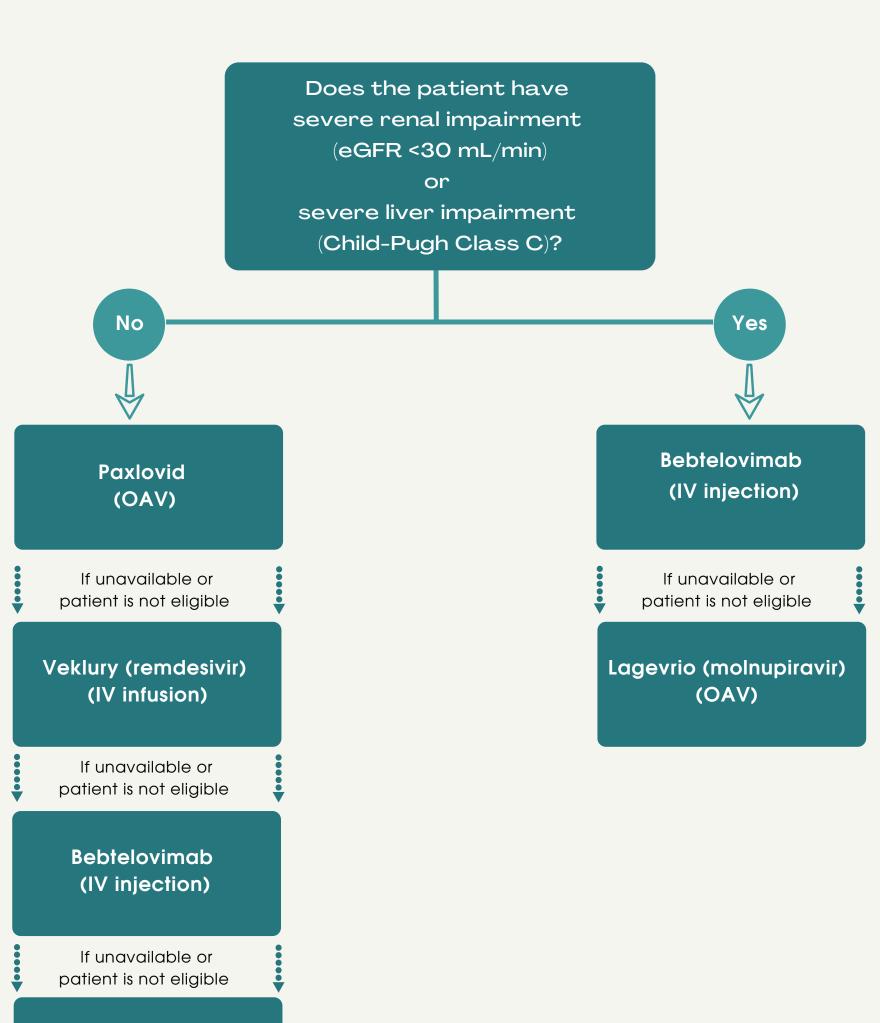


Paxlovid is a first-line treatment; consider other treatments when Paxlovid is unavailable or not clinically indicated.

\*Proof of a positive COVID-19 PCR test is not a requirement from MDHHS or under the EUAs for COVID-19 therapeutics; consider accepting athome test results.

<sup>\*\*</sup>For patients who don't qualify for COVID-19 outpatient treatments, provide supportive care and anticipatory guidance per National Institutes of Health and CDC Guidelines.

# Hepatic and Renal Function Considerations



Lagevrio (molnupiravir)
(OAV)

### COVID-19 Treatments Main Considerations

Health care providers should review the medication-specific FDA fact sheet before prescribing.

#### <u>Paxlovid</u>

At least 12 YO & 40 Kg

- Administer ASAP within **5 days** of symptom onset.
- Evaluate, as needed, for hepatic and renal function:
  - Normal Renal Function (eGFR ≥ 60 mL/min);
     Standard Dose Pack: 300 mg nirmatrelvir taken
     together with 100 mg ritonavir twice daily for 5 days.
    - Moderate Renal Impairment (eGFR ≥ 30 to < 60);</li>
       Renal Dose Pack:150 mg nirmatrelvir taken together
       with 100 mg ritonavir twice daily for 5 days.
    - Not recommended in severe hepatic or renal impairment.
- Obtain patient's medication list and review prior to prescribing Paxlovid for the potential of <u>drug-drug</u> interaction. Management of Paxlovid drug-drug-interactions tools:
- Paxlovid Drug-Drug-Interactions list by University of Michigan



 COVID-19 Drug interactions by University of Liverpool



• FDA PAXLOVID Patient Eligibility
Screening Checklist Tool



#### Veklury (remdesivir)

At least 28 Days & 3 Kg

- \* Administer ASAP within **7 days** of symptom onset.
- Perform eGFR, hepatic laboratory, and prothrombin time testing prior to initiating Veklury and during use as clinically appropriate (per FDA approval):
  - Not recommended in severe renal impairment (eGFR <30 mL/min).</li>
  - Further consideration needed if elevation in transaminases.



- Dose for adult or pediatric patient (ages 12 and older weighing at least 40 kg) is:
  - 200 mg IV x 1 dose on Day 1, and
  - 100 mg IV x 1 on Days 2-3.
- Dose for pediatric patient (older than 28 days weighing at least 3 kg to less than 40 kg) is:
  - 5 mg/kg IV x 1 dose on Day 1, and
  - 2.5 mg/kg IV x 1 on Days 2-3.
  - For this group of patients use 100 mg lyophilized powder for Injection only.
- \*Observe patient for signs and symptoms of a clinically significant hypersensitivity reaction.
- \*\*Veklury is in limited availability. If not readily available, consider bebtelovimab.

## COVID-19 Treatments Main Considerations Cont.

Health care providers should review the medication-specific FDA fact sheet before prescribing.

#### <u>Bebtelovimab</u>

At least 12 YO & 40 Kg

\*Administer ASAP within **7 days** of symptom onset.

3 rd Choice

- \*Dose is 175 mg single IV injection.
- \*Observe patient for one hour after bebtelovimab injection.
- Give only when Paxlovid and Veklury are unavailable or not indicated.

#### <u>Lagevrio (molnupiravir)</u>

At least 18 YO

\*\*Administer ASAP within **5 days** of symptom onset.



- Tose is 800 mg by mouth every 12 hours for 5 days.
- Molnupiravir is not recommended in pregnancy.
- \*\*Males and females should use effective contraception during and following treatment with molnupiravir.
- Give only when Paxlovid, Veklury and bebtelovimab are unavailable or not indicated.

Paxlovid

EUA Fact Sheet

for HCPs



Bebtelovimab
EUA Fact Sheet
for HCPs

Veklury Fact

Sheet

for HCPs

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Lagevrio
EUA Fact Sheet
for HCPs



For more information please visit Michigan.gov/COVIDTherapy.

