

**Monday, February 7, 2022**

**COVID -19 Update**

**From Dr. Sara Knutson**

**Delta Health Community Providers:**

**1) Monoclonal Antibody allocation is again available for Tier 1-4 patients.**

**Tier 1-4 defined as follows:**

**TIER 1:** Unlikely adequate immune response OR unvaccinated >75yo or >65yo and concurrent risk factors for severe disease

**TIER 2:** Pregnant, highest risk pediatric patients, OR Unvaccinated and >65yo OR unvaccinated and <65yo with risk factors

**TIER 3:** Vaccinated and >75yo OR Vaccinated and <65yo with multiple concurrent risk factors (high risk) for severe disease

**TIER 4:** Vaccinated and >65yo OR Vaccinated and <65yo with some risk for severe disease

\*\* "vaccinated" here implies completion of primary series, with or without booster (without booster = higher risk)

\*\* If demand for MCAB outstrips supply, we will prioritize the highest risk Tier 1-2 patients for treatment. Again, you need to provide me your patient's vaccination status (not included on REDCAP) to determine their TIER level.

**2) Outpatient PAXLOVID** (the oral antiviral) will be **available** from Delta Health **beginning Tue, Feb 8**. The following information applies for PAXLOVID obtained from Delta Health:

- A rapid COVID test rather than PCR is best, given the shorter time constraint (5 days from symptom onset) for this treatment option.
- Send your patient referral using the RECAP system we already have in place.
- For a complete referral, we will also need a CURRENT medication list somewhere in our system (Athena/Meditech/QHN/FAX), a creatinine level if renal disease is a concern, and a 'heads up' text to me, noting the patient's vaccination status and medication list location.
- We will determine which therapeutic (Sotrovimab or PAXLOVID) is appropriate based on patients medications and clinical parameters, current supply of therapeutics, and days from onset of symptoms at time referral is completed
- For PAXLOVID, one of our nurse practitioners will contact the patient, review the clinical information/obtain consent, describe the pickup process at our pharmacy, and order the medication.

- For MCAB, the referral will be sent to the infusion clinic and scheduled in the usual manner.
- 3)** Delta Health Pharmacy is extending themselves to act as an outpatient pharmacy so that our patients can have access to this treatment option until it is in outpatient pharmacies. It is extremely important as a provider you make things easier for them with an accurate medication list and renal function (when indicated) that is READILY available. If needed data can't be found, there will be a delay and your patient may lose the option for any treatment.
- 4)** It is important when you refer your patients that you let them know they might receive the IV MCAB infusion OR the oral tablet 5 day regimen. Both options have been shown to be effective in reducing risk of severe disease/death among high risk patients.
- As before, the referring provider is responsible to get verbal consent for the MCAB PRIOR to REDCAP referral.
  - We will choose PAXLOVID when we can (ie nonpregnant patient, no medication interactions or renal/liver disease, AND an early referral) to preserve our supply of Sotrovimab.
- 5)** **EUAs for PAXLOVID and Sotrovimab** (for HCPS and Patients/Caregivers) as well as the '**Drug List of Interactions with PAXLOVID**' and a **drug interaction checker link** are available on the MD site, if needed.

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