

Adult Remdesivir (RDV) Criteria – Pharmacist Guide

Background: Therapeutics for COVID-19 are constantly evolving and new literature prompts reassessment of criteria for usage. Weighing the available evidence, AHT has modified the RDV criteria for use to the following:

- ☐ COVID-19 positive patients within 7 days of symptom onset **requiring supplemental oxygen to maintain O₂ > 94% (severity score 1 – 3; maximum 5 days) (200 mg IV x1 then 100 mg IV q24hr x 4)**
- ☐ COVID-19 positive patients within 7 days of symptom onset **on room air meeting 1 of the 2 following criteria (severity score 0) for a maximum of 3 days (200 mg IV x 1 then 100 mg IV q24hr x 2):**
 - Presenting with bilateral infiltrates on imaging and at least 1 risk factor (age > 65, obesity, structural lung disease, and [certain medical conditions defined by the CDC](#))
 - [High risk patients](#) admitted for non-COVID-19 reasons (ie: surgery) who test positive and have mild-moderate symptoms

All providers may order the loading dose for eligible (see criteria above) patients, but **maintenance doses require an Infectious Diseases, Pulmonary, or Critical Care consult.**

Pharmacist Requirements:

- ☐ **Pharmacists MUST contact the ordering providers under the following circumstances:**
 1. **Documented symptom onset > 7 days** (remdesivir has not been shown to be beneficial – recommend discontinuation [DC] of therapy)
 2. Patients on room air who do not meet permissive use criteria (see above – recommend DC)
 - Imaging information is available in PowerChart > Results Review > Radiology > CXR/CT chest)
 - Additional risk factors available via hyperlink ([certain medical conditions defined by the CDC](#))
 3. **AST/ALT > 10x ULN; known hypersensitivity reaction; COVID-19 negative; prior treatment with RDV**
- ☐ **Pharmacists MUST modify duration to 3 days for appropriate RDV orders on room air or 5 days for appropriate orders on supplemental oxygen PER ELECTRONIC PROTOCOL (no need to call the prescriber)**
 1. Prescribers may continue RDV if clinically warranted (ie: room air progresses to O₂; extend 3 to 5 days)
 2. **All RDV orders for > 5 days: Pharmacist must call – not allowed for most patients per CMO**
 3. **Pharmacists with any questions or uncertainties regarding the order MUST CALL THE PROVIDER**
- ☐ EUA Fact Sheets are only required for pediatric (age < 12) patients. Loading doses will continue to be prepared in the IV room and maintenance doses mixed on the floor (storage in Pyxis). Each vial (100 mg) = \$500.

Therapeutic options should be based on severity using the following scale:

0 = Patient on room air	3 = Patient requires HFNC, CPAP, NIV
1 = Patient requires supplemental O ₂ via NC up to a max of 6L	4 = Patient intubated with minimal support Pa/FiO ₂ , or using PS
2 = Patient requires supplemental O ₂ in addition to ≥ of the following:	5 = Patient intubated PaO ₂ /FiO ₂ > 150 mmHg
- Dyspnea or staccato speech at rest or after minimal activity	6 = Patient intubated PaO ₂ /FiO ₂ < 150 mmHg
- RR > 22 on 6L	7 = Patient intubated PaO ₂ /FiO ₂ < 150 mmHg & pressor use
- PaO ₂ < 65 mmHg with 6L	8 = Patient intubated in prone position or ECMO
- Worsening infiltrates on imaging (CT preferred)	

Severity Score	Treatment for Hospitalized Patients [^]
0	Supportive care alone for vaccinated, immunocompetent patients and all patients with symptom onset ≥ 7 days - if clinically stable, consider discharge for self-quarantine ± Remdesivir (maximum 3 days - based on criteria)
1	Dexamethasone 6 mg PO or IV for up to 10 days Remdesivir* (based on criteria)
2	Dexamethasone 6 mg PO or IV for up to 10 days Remdesivir (based on criteria) ± Tocilizumab OR Baricitinib (based on criteria)
3	Corticosteroids [#] ± Remdesivir* (based on criteria) ± Tocilizumab** OR Baricitinib ^{^^} (based on criteria)
≥ 4	Corticosteroids [#] ± Tocilizumab** (based on criteria)

[#]Corticosteroids: non-ARDS - dexamethasone 6 mg daily; ARDS/Cytokine Storm - dexamethasone 10 mg q12hr. Remdesivir criteria: If hospitalized for non-COVID-19 indication within 7 days of symptom onset / new diagnosis OR if hospitalized for COVID-19 on room air with bilateral infiltrates and at least 1 risk factor^{^^} for disease progression OR COVID-19 positive within 7 days of admission and SS 1-3. ^{**}Tocilizumab criteria: rapidly increasing oxygen requirements AND CRP ≥ 7.5 mg/dL AND on SOC for over 24 hours; OR SS ≥ 3. ^{^^}Baricitinib criteria: rapidly increasing oxygen requirements AND 1+ elevated marker of inflammation (ferritin/IL-6/CRP) and on SOC for over 24 hours OR ≥ 3.

^{^^}Risk factors include: age ≥ 65, BMI > 30, immunocompromised, structural lung disease, CVD, T2DM, CKD, CLD. **Modified from AH SRC Guidelines.**