HOUSTON Methodist LEADING MEDICINE

HOUSTON METHODIST
PHARMACY & THERAPEUTICS NEWS
June 2024

FORMULARY UPDATES

Laura M. Blackburn, PharmD

The following medications were ADDED to Formulary

Secukinumab (Cosentyx®) IV

Category: Humanized immunoglobulin G1 (IgG1) monoclonal antibody

FDA label: Ankylosing spondylitis, Axial spondyloarthirtis, Hidradenitis suppuritiva, Plaque psoriasis, Psoriatic arthritis,

HM Formulary restrictions: Restricted to FDA labeled indications and prescriber restrictions to Rheumatology. Restricted to the Outpatient care setting with prior financial approval

Ciltacabtagene autoleucel/Cilta-Cel (Carvykti®)

Category: Chimeric Antigen Receptor (CAR) T-Cell Immunotherapy

FDA-label: Multiple myeloma, relapsed or refractory who have received at least 1 prior line of therapy, including a proteasome inhibitor and an immunomodulatory agent, and are refractory to lenalidomide.

HM Formulary restrictions: Restricted to Hematology/oncology providers who are certified through the REMS program. Patients must be enrolled in the REMS program. Restricted to the outpatient care setting with prior financial approval.

The Epic Treatment plan is currently being built for this product

HIV Antiretroviral Therapy (ART) Formulary Class Review

The HIV ART class was reviewed to streamline options and avoid waste due to low use and expiration of product.

The following agents remain on formulary.

bictegrav/emtricit/tenofov ala	zidovudine
dolutegravir sodium	emtricitabine/tenofovir (TDF)
tenofovir disoproxil fumarate	dolutegravir/rilpivirine
lamivudine	darunavir
raltegravir potassium	darunavir/cobicistat
abacavir sulfate	ritonavir
abacavir/dolutegravir/lamivudine	nevirapine

HM will utilize the patients home supply when possible to meet a patient's needs if a non-formulary product is required.

To request a medication for formulary review, **click here**

The *Pharmacy & Therapeutics News* is dedicated to providing the most current information regarding medication-use policy and formulary issues. Each issue details recently approved actions from the system P&T committee as well as relevant patient safety, pharmacotherapy and drug distribution updates. Entity representatives to the system P&T committee structure can be found here.

Epic Updates

Pemivibart (Pemgarda)

Pemivibart, the covid-19 monoclonal antibody approved for prophylaxis of Covid-19 in high-risk patients unable to respond to vaccination approved by HM for formulary addition in May, was activated in epic and inventory obtained.

To order, enter a therapy plan and indicate the outpatient infusion location you want your patient to receive treatment.

Providers must review the EUA Patient information fact sheet with patients prior to ordering.

Patients require financial clearance prior to scheduling. Pemivibart is not on allocation as previous agents were.

Auto Verification of Medication Orders:

Autoverifying medication orders is a powerful efficiency tool, but must be highly standardized, safe, and monitored. P&T approved System Policy PCPS 212 Auto-verification of Medication Orders that was piloted at HMH and satisfied the requirements. Implementation of these practices can be applied across HM entities uniformly.

To assure safety of our emergency department patients, all IV insulin orders and orders for opioid with frequencies greater than, "once" are not autoverified in that setting.

MEDICATION POLICY UPDATES

Amaris Fuentes, PharmD

Rho-Gam for Automated Dispensing Cabinet Override

Rho-Gam will be added to System_PCPS152 Overriding Medications in Automated Dispensing Cabinet as an allowance for override in Emergency Department areas. This change facilitates timely administration for obstetric patients in our emergency care centers.

SYSTEM CHEMOTHERAPY STEWARDSHIP COMMITTEE

Adam Smith, PharmD

Hematology—Oncology Epic Treatment Plan Review Oversight Efficiency Update

There are approximately 1,300 hematology-oncology treatment plans in Epic used for standard of care and research-based entries. To ensure continued appropriateness and safety of hematology-oncology treatments, Epic treatment plans are regularly reviewed to ensure the content is consistent with best-practices and contains contemporary formulary product selection and dosing. Each month a number of treatment plans are reviewed for system-wide optimization to ensure dosing, and monitoring safeguards (e.g., labs/holding parameters, supportive care).

To streamline the review and approval process of proposed changes, physician members of the System Chemotherapy Stewardship Committee will provide formal review and approvals. This reporting change is expected to improve the efficiency of the approval process and provide visibility to the most affected provider group.

Antiemetic Standardization

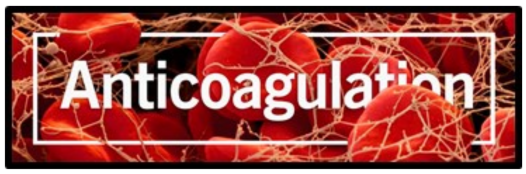
To decrease variability and align HM practice with NCCN guideline-directed recommendations amongst HM sites for Chemotherapy-induced nausea and vomiting (CINV) management, a standardized antiemetic protocol was approved and will be incorporated into all HM treatment plans .

Emetogenic Risk	Treatment Options
Minimal	None
Low	Ondansetron 8 mg
Moderate	Palonosetron (except for SQ or Multi-day chemotherapy regimens) Dexamethasone 12mg default (dosing buttons available for alternative dosing options)
High	Palonosetron (except for SQ or Multi-day regimens) Dexamethasone 12mg default (dosing buttons available for alternative dosing options) Fosapreitant

Rasburicase Fixed-Dose Policy

Rasburicase is a recombinant urate-oxidase indicated for the management of hyperuricemia associated with malignancy in patients receiving anticancer therapy expected to result in tumor lysis syndrome (TLS). Published literature and HM internal studies support single, fixed-dose administration. A HM CQI review found variable dosing practices across HM and inconsistencies with a previously approved dose-capping approach. To address the variance, an existing entity-level policy was elevated to a system policy and refinements to monitoring, and dosing recommendation were updated. Rasburicase continues to be restricted to nephrology and hematology/oncology providers. Use is restricted to patients with serum uric acid levels >7.5 mg/dL and two risk factors or may be treated if the urica acid level is less than 7.5 mg/dL if the patient has 3 or more risk factors. Automatic dose capping will be applied by the pharmacists as follows: Uric acid levels <10: Single 3mg dose ; Uric acid levels ≥10: Single 6 mg dose

ANTICOAGULATION USE SAFETY



Michael Sirimaturos, PharmD

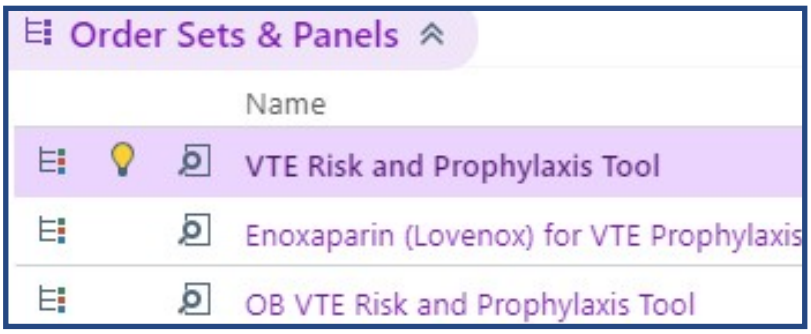
Enoxaparin VTE Prophylaxis in Overweight and Obese Patients

Enoxaparin 40 mg once daily for venothromboembolism (VTE) prophylaxis in overweight and obese patients has not always been effective due to their high risk for VTE. A fixed-dose enoxaparin BID policy for overweight and obese patients (System RXCLIN_159) was implemented in 2019 providing recommended VTE prophylaxis dosing based on patient weight (chart below). Orders originating from the VTE prophylaxis order sets automatically select the appropriate fixed-dose regimen based on the charted weight.

Patient Weight (in kg)	Recommended Enoxaparin Dose
100 to 139 kg	30 mg subcutaneously twice a day
140 kg or greater	40 mg subcutaneously twice a day

A HM review of ~2,400 overweight/obese patients demonstrated positive outcomes including low rates of inpatient thrombosis and bleeding for patient's following policy-guided dosing. Of note, 21% of overweight/obese patients were not dosed accordingly. The majority of non-policy guided orders were either purposeful adjustments (i.e. anemia, acute blood loss) or failure to adjust when using standalone orders from the facility list (outside of the VTE ppx orders sets). The standalone orders lack the overweight/obesity dosing guidance recommendations upon ordering. As such, it is recommended that all VTE ppx orders are placed utilizing the VTE prophylaxis order sets available in Epic.

These order sets include important dosing guidance based on weight, renal function, and population-based indications (e.g., surgical, OB, etc.). The ability to order VTE prophylaxis as a standalone entry through the facility list will be phased-out to promote use of the Order Sets and take advantage of the built-in safeguards.



This change is the next in a series of previous enhancements to achieve more consistent care for our patients and improve outcomes. Our April 2024 P&T News has more about dose guidance with UFH.

Unfractionated Heparin (UFH) Protocol Consolidation Planning Updates

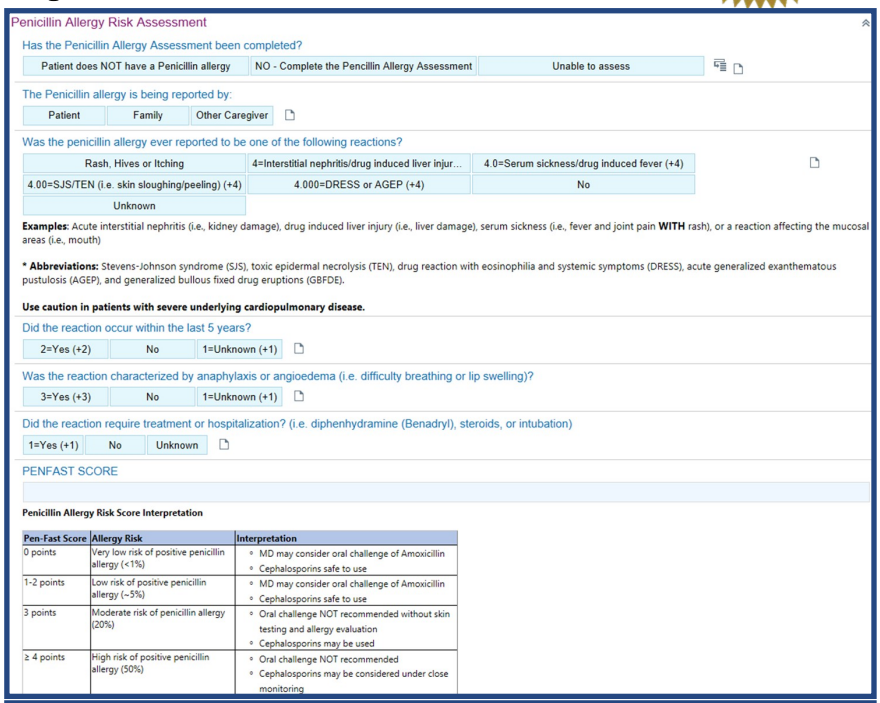
As described in our November 2023 P&T News, the System Anticoagulation Committee has been reviewing the Unfractionated Heparin (UFH) dosing protocols for appropriate consolidation. Pharmacists are consulted on over 11,000 patients a year for management and regularly perform quality assurance reviews. A review of the intra-aortic Balloon Pump protocol and liver transplant protocols were recently completed and were the last in a series of assessments completed and presented over the last several months. The corresponding epic build and testing are underway. Education on the changes and implementation is expected in September 2024.

ANTIMICROBIAL STEWARDSHIP

Shivani Patel, PharmD & Wesley Hoffmann, PharmD

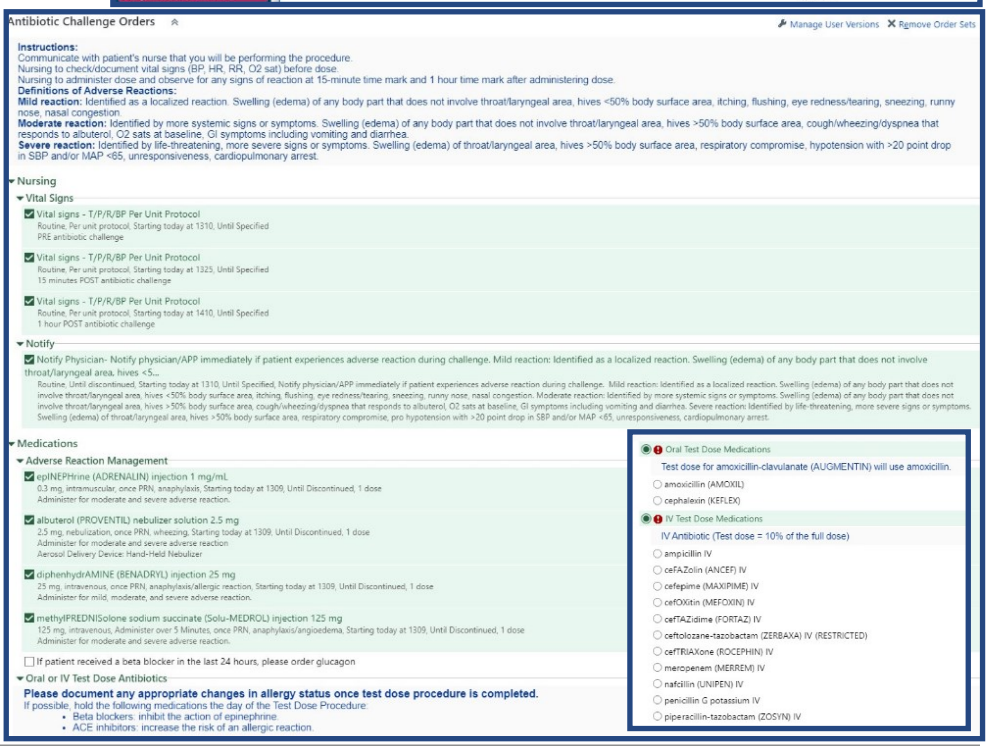
Penicillin Allergy Assessment and Antibiotic Challenge Ordersets Introduced

In past P&T News issues we have detailed the PenFAST assessment and the utility of identifying improper penicillin allergy results to avoid suboptimal antibiotic selection and reduce the risk of adverse events and treatment failures. Nursing staff are now completing PenFAST assessments in Epic and the information is in the Admission Tab of the patient's chart.



Antibiotic Challenge Ordersets

There are cases where an antibiotic challenge is warranted to treat a patient with the most effective antimicrobial. Patients with PenFAST scores less than 3 may be considered for a challenge in certain indications. The Antibiotic Challenge orderset provides necessary guidance, rescue medications, vital sign monitoring, and dosing regimens of antimicrobials for a safe antibiotic challenge to confirm or rule-out a labeled allergy.



Search for "Antibiotic Challenge Orders" in Epic to locate order set. Oral and IV beta lactams are included as options in the challenge orderset.

Contact your local antimicrobial stewardship team for any questions.