THE
MUSCOGEE (CREEK) NATION

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STANDING ORDERS FOR OUTPATIENT MONOCLONAL ANTIBODY INFUSION THERAPY

Patient Name: _____ DOB: _____ Date: _____
Patient Weight: _____ Patient Height: _____ Patient BMI: _____

Positive patient:

Z86.16 Date of symptom onset: _____ (must be within 10 days) (+) Test date: _____

Criteria for Identifying High Risk adults and pediatric patients (age 12-17 years and weighing at least 40 kg) at higher risk for progression to severeCOVID-19 (if vaccinated, the patient must meet 2 off the following criteria to qualify; if not vaccinated, the patient must meet at least 1 of the following criteria):

Is Patient Vaccinated? **YES** **NO**

- □ Unvaccinated or not fully vaccinated
- □ 65 years of age or older
- □ Obesity or being overweight, BMI >35 or if age 12-17, have BMI ≥85th% for their age/gender)
- □ Pregnancy;
- □ Chronic kidney disease
- □ Diabetes
- □ Immunosuppressive disease or immunosuppressive treatment
- □ Cardiovascular disease (including congenital heart disease) or hypertension
- □ Chronic lung diseases (i.e. COPD, asthma [moderate-to-severe], interstitial lung disease, cystic fibrosis and pulmonary hypertension)
- □ Sickle cell disease
- □ Neurodevelopmental disorders (i.e. cerebral palsy) or other conditions that confer medical complexity (i.e.:, genetic or metabolic syndromes and severe congenital anomalies)
- □ Having a medical-related technological dependence (i.e. tracheostomy, gastrostomy, or positive pressure ventilation (not related to COVID-19)).

Prophylaxis patient:

Z20.822 Date of exposure: _____ (within 10 days of exposure) (-) Test date: _____

- □ Not fully vaccinated *and* are not expected to mount an adequate immune response to SARS-CoV-2 infection due to at least one of the above listed immunocompromising conditions following exposure to COVID-19 or high risk of exposure based on institutional living conditions.

EXCLUSIONS FOR MONOCLONAL ANTIBODY INFUSION THERAPY:

- Does not meet any of the high risk factors as listed above, and has no known exposure (pre-exposure) to COVID-19.
- Patient is under 12 years of age or less than 40kg.
- REGEN-COV (casirivimab and imdevimab) is not authorized for use in patients:
  - who are hospitalized due to COVID-19, OR
  - who require oxygen therapy due to COVID-19 (to keep Sa02 90% on room air), OR
  - who require an increase in baseline oxygen flow rate due to COVID-19 in those on chronic oxygen therapy due to underlying non-COVID-19 related comorbidity.
- Monoclonal antibodies, such as REGEN-COV, may be associated with worse clinical outcomes when administered to hospitalized patients with COVID-19 requiring high flow oxygen or mechanical ventilation.
- Provider may, at their discretion, determine that patient is too clinically ill in their judgement and disqualify a patient. Patient should be directed to an ED or urgent care for immediate medical intervention.

Orders:

1. 600 mg of casirivimab and 600 mg of imdevimab in 50mL of 0.9% Sodium Chloride, or 5% Dextrose, administered together as a single intravenous infusion over at least 20 minutes.
   a. In the event IV access cannot be obtained, subcutaneous route can be utilized as per current EUA guidelines. Please contact pharmacist for assistance.
2. At minimum, vital signs will be obtained upon arrival, post-infusion and upon discharge. Vital signs may be increased at the clinicians discretion. Pt will be monitored for 1 hour post-infusion.
3. Tylenol 650 mg PO PRN fever or headache
4. Zofran 4 mg ODT PRN nausea, or Zofran 4mg IV Push x1 if actively vomiting.
5. Benadryl 25mg IV push or 25mg PO PRN for mild reaction.
6. For moderate or severe infusion reactions discontinue infusion, notify onsite provider and transfer patient to an Emergency Department and follow adverse reaction policy.
7. If no reactions discharge patient home with instructions and fact sheet 1 hour post infusion.

SIGNATURE: _____Dr. Lawrence Vark, DO