

# Paxlovid Checklist Tool for Prescribers

The National Institute of Health (NIH) COVID-19 Treatment Guidelines recommends ritonavir-boosted nirmatrelvir (Paxlovid), as the preferred treatment for most high-risk, non-hospitalized patients with mild to moderate COVID-19. Paxlovid is currently free for all eligible patients. Visit <https://aspr.hhs.gov/COVID-19/Therapeutics/Documents/COVID-Therapeutics-Decision-Aid.pdf> to read the guidelines.

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## Eligibility Criteria

The Food and Drug Administration (FDA) has issued an emergency use authorization (EUA) for Paxlovid for the treatment of COVID-19 in individuals who meet all the following criteria:

- Test positive for COVID-19 on a nucleic acid amplification (NAA) or antigen test, including an FDA-authorized home-test kit
  - Are age 12 or older and weigh at least 88 pounds (40 kilograms)
  - Are age 65 or older or have a medical condition or other factor that increases their risk for severe COVID-19. More information on underlying medical conditions can be found by visiting [cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html](https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html).
  - Have mild to moderate COVID-19 symptoms
  - Can start treatment within five days of symptom onset
  - Are not hospitalized due to COVID-19 when treatment is initiated
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## Drug Interactions to Review Prior to Prescribing Paxlovid

Co-administration of Paxlovid can alter the plasma concentrations of other drugs, and other drugs may alter the plasma concentrations of Paxlovid.

- Carefully review concomitant medications, including over-the-counter medicines, herbal supplements, and recreational drugs, to evaluate the potential for drug-drug interactions.
- Important drug-drug interactions with Paxlovid:**
  - Ritonavir can increase concentrations of certain drugs that are highly dependent on CYP3A4 for clearance, increasing the potential for drug toxicities.
  - Drugs that induce CYP3A4 (such as **rifampin**) can lead to significant reductions in nirmatrelvir and ritonavir concentrations, which may decrease the therapeutic effect of Paxlovid.
  - Refer to the Paxlovid EUA Fact Sheet for Healthcare Providers (Sections 4 and 7) and the NIH Treatment Guidelines on Potential Paxlovid Drug-Drug Interactions for details on identifying and managing drug-drug interactions. To read the fact sheet, visit [fda.gov/media/155051/download](https://www.fda.gov/media/155051/download).
  - For additional decision support, access the University of Liverpool's COVID-19 Drug Interactions Checker by visiting [covid19-druginteractions.org/checker](https://covid19-druginteractions.org/checker).
- Hormonal contraceptives:**
  - Patients on combined hormonal contraceptives (i.e., ethinyl estradiol) should use an effective **alternative contraceptive method** or an additional barrier method, or not have sexual activity during treatment with Paxlovid.
- Patients on ritonavir- or cobicistat-containing HIV or HCV regimens should continue their treatment as indicated.

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## Information to Review Prior to Prescribing

- ☑ Health care practitioners must communicate information consistent with the EUA Fact Sheet for Patients, Parents, and Caregivers and provide them with a paper or electronic copy prior to administration of Paxlovid. Access the fact sheet at [fda.gov/media/155051/download](https://www.fda.gov/media/155051/download).
- ☑ **Important prescribing instructions:**
  - Prescriptions should specify the numeric dose of each active ingredient within Paxlovid: 300 mg nirmatrelvir (two 150 mg tablets) with 100 mg ritonavir (one 100 mg tablet), with all three tablets taken together twice daily for five days.
- ☑ Dosing information in patients with **renal impairment:**
  - Mild renal impairment (eGFR  $\geq 60$  to  $< 90$  ml/min): No dosage adjustment needed.
  - Moderate renal impairment (eGFR  $\geq 30$  to  $< 60$  ml/min): Reduce dosage to 150 mg nirmatrelvir (one 150 mg tablet) with 100 mg ritonavir (one 100 mg tablet) taken together twice daily for five days.
  - Severe kidney impairment (eGFR  $< 30$  mL/min): Paxlovid is not recommended. **Consider alternate treatments per <https://aspr.hhs.gov/COVID-19/Therapeutics/Documents/COVID-Therapeutics-Decision-Aid.pdf>.**
- ☑ Use in patients with hepatic impairment:
  - Mild (Child-Pugh Class A) to moderate (Child-Pugh Class B) liver impairment: No dosage adjustment needed.
  - Severe liver impairment (Child-Pugh Class C): Therapy is not recommended.

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## Additional Prescribing Information

Paxlovid can be prescribed to any Walgreens, Walmart, Meijer, CVS store as well as to other pharmacies that have Paxlovid in stock. They can be found on the COVID-19 Therapeutics Locator at [covid-19-therapeutics-locator-dhhs.hub.arcgis.com](https://covid-19-therapeutics-locator-dhhs.hub.arcgis.com).

- ☑ Before sending the prescription, verify the patient's phone number and address for delivery options if available at the pharmacy.
- ☑ In the note for pharmacist section, indicate the patient's date of symptom onset.  
Submit a prescription to pharmacy of choice with product in stock.
- ☑ **Advise patient that they MUST pick up their prescription and start the medication within 5 days of starting symptoms.**
- ☑ Contact [dph.mabtherapy@illinois.gov](mailto:dph.mabtherapy@illinois.gov) or 800-889-3931 for questions on treatment or other concerns.