

**Medications**

**Select the appropriate symptom level: (Single Response)**

**( ) Moderate to Severe COVID-19**

Houston Methodist has approved this drug with certain criteria based on those who are most likely to benefit from its use. Please review the following criteria for your patient:

SARS-CoV-2 PCR or Antigen result documented within 10 days

Documented symptom onset within 10 days

Requiring supplemental oxygen to maintain SpO2 GREATER than 94% or an SpO2 LESS than or EQUAL to 94% on Room Air without improvement

ALT LESS than 10x the upper limit of normal

Patients may not benefit from remdesivir treatment if they are beyond 10 days from symptom onset

<input type="checkbox"/> remdesivir IV Loading and Maintenance Doses - HMH Only	<b>"Followed by" Linked Panel</b>
<input type="checkbox"/> remdesivir in sodium chloride 0.9% 100 mL infusion	200 mg, intravenous, for 30 Minutes, once, Starting H+90 Minutes, For 1 Doses Hold for ALT greater than 500. Provide the approximate number of days the patient has had respiratory Covid-19 Symptoms: Patient has a positive COVID-19 PCR or Antigen result within the last 10 days: Is the patient currently receiving oxygen support or has consistently had oxygen saturations LESS than 94% on Room Air without improvement:
<input type="checkbox"/> remdesivir in sodium chloride 0.9% 100 mL infusion	100 mg, intravenous, for 30 Minutes, daily at 1100, For 4 Doses NOTE: Patients do NOT need to complete a full course of Remdesivir prior to discharge. Hold for ALT greater than 500. Provide the approximate number of days the patient has had respiratory Covid-19 Symptoms: Patient has a positive COVID-19 PCR or Antigen result within the last 10 days: Is the patient currently receiving oxygen support or has consistently had oxygen saturations LESS than 94% on Room Air without improvement:
<input type="checkbox"/> remdesivir IV Loading and Maintenance Doses - HMSL Only	<b>"Followed by" Linked Panel</b>
<input type="checkbox"/> remdesivir in sodium chloride 0.9% 100 mL infusion	200 mg, intravenous, for 30 Minutes, once, Starting H+90 Minutes, For 1 Doses Hold for ALT greater than 500. Provide the approximate number of days the patient has had respiratory Covid-19 Symptoms: Patient has a positive COVID-19 PCR or Antigen result within the last 10 days: Is the patient currently receiving oxygen support or has consistently had oxygen saturations LESS than 94% on Room Air without improvement:
<input type="checkbox"/> remdesivir in sodium chloride 0.9% 100 mL infusion	100 mg, intravenous, for 30 Minutes, every 24 hours, Starting H+24 Hours, For 4 Doses NOTE: Patients do NOT need to complete a full course of Remdesivir prior to discharge. Hold for ALT greater than 500. Provide the approximate number of days the patient has had respiratory Covid-19 Symptoms: Patient has a positive COVID-19 PCR or Antigen result within the last 10 days: Is the patient currently receiving oxygen support or has consistently had oxygen saturations LESS than 94% on Room Air without improvement:
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[ ] remdesivir IV Loading and Maintenance Doses - HMTW Only	<b>"Followed by" Linked Panel</b>
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[ ] remdesivir IV Loading and Maintenance Doses - HMCL Only	<b>"Followed by" Linked Panel</b>
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[ ] remdesivir in sodium chloride 0.9% 100 mL infusion	100 mg, intravenous, for 30 Minutes, daily at 1300, For 4 Doses NOTE: Patients do NOT need to complete a full course of Remdesivir prior to discharge. Hold for ALT greater than 500. Provide the approximate number of days the patient has had respiratory Covid-19 Symptoms: Patient has a positive COVID-19 PCR or Antigen result within the last 10 days: Is the patient currently receiving oxygen support or has consistently had oxygen saturations LESS than 94% on Room Air without improvement:
[ ] remdesivir IV Loading and Maintenance Doses - HMWB Only	<b>"Followed by" Linked Panel</b>

[ ] remdesivir in sodium chloride 0.9% 100 mL infusion	200 mg, intravenous, for 30 Minutes, once, Starting H+90 Minutes, For 1 Doses Hold for ALT greater than 500. Provide the approximate number of days the patient has had respiratory Covid-19 Symptoms: Patient has a positive COVID-19 PCR or Antigen result within the last 10 days: Is the patient currently receiving oxygen support or has consistently had oxygen saturations LESS than 94% on Room Air without improvement:
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[ ] remdesivir IV Loading and Maintenance Doses - HMCCH Only	<b>"Followed by" Linked Panel</b>
[ ] remdesivir in sodium chloride 0.9% 100 mL infusion	200 mg, intravenous, for 30 Minutes, once, Starting H+90 Minutes, For 1 Doses Hold for ALT greater than 500. Provide the approximate number of days the patient has had respiratory Covid-19 Symptoms: Patient has a positive COVID-19 PCR or Antigen result within the last 10 days: Is the patient currently receiving oxygen support or has consistently had oxygen saturations LESS than 94% on Room Air without improvement:
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() Mild COVID-19 (Single Response)	
() Pharmacy consult for COVID-19 monoclonal antibody therapy	Routine, Until discontinued, Starting S Please select which criteria the patient meets for monoclonal antibody therapy:
() Remdesivir infusion (3 days)	

Houston Methodist has approved the use of a 3 day course of remdesivir in patients with mild COVID-19 not admitted to the hospital for COVID related symptoms

Please review the following criteria for your patient:

Patient was not hospitalized for COVID-19 diagnosis

Patient is currently not requiring oxygen or increase in baseline oxygen flow rate due to COVID-19

Patient has not received remdesivir in last 90 days

Patient is Immunocompromised OR > 65 with at least 1 coexisting condition that converts higher risk of progress to severe COVID-19

If patient was hospitalized for COVID-19 and requiring oxygen, please see "Moderate to Severe COVID-19" order set"

	<b>"Followed by" Linked Panel</b>
<input type="checkbox"/> Mild - HMB Only	
<input type="checkbox"/> remdesivir infusion	200 mg, intravenous, for 60 Minutes, once, For 1 Doses Provide the approximate number of days the patient has had respiratory Covid-19 Symptoms: Patient has a positive COVID-19 PCR or Antigen result within the last 10 days: My patient is hospitalized for COVID-19: My patient is requiring oxygen or increase in baseline oxygen flow due to COVID-19: My patient has received RDV within the past 90 days: My patient is immunocompromised OR > 65 years old and has one or more COVID-19 high risk factor:
<input type="checkbox"/> remdesivir infusion	100 mg, intravenous, for 60 Minutes, daily at 1500, Starting S+1, For 2 Doses Provide the approximate number of days the patient has had respiratory Covid-19 Symptoms: Patient has a positive COVID-19 PCR or Antigen result within the last 10 days: My patient is hospitalized for COVID-19: My patient is requiring oxygen or increase in baseline oxygen flow due to COVID-19: My patient has received RDV within the past 90 days: My patient is immunocompromised OR > 65 years old and has one or more COVID-19 high risk factor:
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<input type="checkbox"/> remdesivir infusion	100 mg, intravenous, for 60 Minutes, daily at 1100, Starting S+1, For 2 Doses Provide the approximate number of days the patient has had respiratory Covid-19 Symptoms: Patient has a positive COVID-19 PCR or Antigen result within the last 10 days: My patient is hospitalized for COVID-19: My patient is requiring oxygen or increase in baseline oxygen flow due to COVID-19: My patient has received RDV within the past 90 days: My patient is immunocompromised OR > 65 years old and has one or more COVID-19 high risk factor:
<input type="checkbox"/> Mild - HMW Only	
	<b>"Followed by" Linked Panel</b>

<input type="checkbox"/> remdesivir infusion	<p>200 mg, intravenous, for 60 Minutes, once, For 1 Doses  Provide the approximate number of days the patient has had respiratory Covid-19 Symptoms:  Patient has a positive COVID-19 PCR or Antigen result within the last 10 days:  My patient is hospitalized for COVID-19:  My patient is requiring oxygen or increase in baseline oxygen flow due to COVID-19:  My patient has received RDV within the past 90 days:  My patient is immunocompromised OR &gt; 65 years old and has one or more COVID-19 high risk factor:</p>
<input type="checkbox"/> remdesivir infusion	<p>100 mg, intravenous, for 60 Minutes, daily at 1500, Starting S+1, For 2 Doses  Provide the approximate number of days the patient has had respiratory Covid-19 Symptoms:  Patient has a positive COVID-19 PCR or Antigen result within the last 10 days:  My patient is hospitalized for COVID-19:  My patient is requiring oxygen or increase in baseline oxygen flow due to COVID-19:  My patient has received RDV within the past 90 days:  My patient is immunocompromised OR &gt; 65 years old and has one or more COVID-19 high risk factor:</p>
<input type="checkbox"/> Mild - HMWB Only	<b>"Followed by" Linked Panel</b>
<input type="checkbox"/> remdesivir infusion	<p>200 mg, intravenous, for 60 Minutes, once, For 1 Doses  Provide the approximate number of days the patient has had respiratory Covid-19 Symptoms:  Patient has a positive COVID-19 PCR or Antigen result within the last 10 days:  My patient is hospitalized for COVID-19:  My patient is requiring oxygen or increase in baseline oxygen flow due to COVID-19:  My patient has received RDV within the past 90 days:  My patient is immunocompromised OR &gt; 65 years old and has one or more COVID-19 high risk factor:</p>
<input type="checkbox"/> remdesivir infusion	<p>100 mg, intravenous, for 60 Minutes, daily at 1500, Starting S+1, For 2 Doses  Provide the approximate number of days the patient has had respiratory Covid-19 Symptoms:  Patient has a positive COVID-19 PCR or Antigen result within the last 10 days:  My patient is hospitalized for COVID-19:  My patient is requiring oxygen or increase in baseline oxygen flow due to COVID-19:  My patient has received RDV within the past 90 days:  My patient is immunocompromised OR &gt; 65 years old and has one or more COVID-19 high risk factor:</p>
<input type="checkbox"/> Mild - HMSL Only	<b>"Followed by" Linked Panel</b>
<input type="checkbox"/> remdesivir infusion	<p>200 mg, intravenous, for 60 Minutes, once, For 1 Doses  Provide the approximate number of days the patient has had respiratory Covid-19 Symptoms:  Patient has a positive COVID-19 PCR or Antigen result within the last 10 days:  My patient is hospitalized for COVID-19:  My patient is requiring oxygen or increase in baseline oxygen flow due to COVID-19:  My patient has received RDV within the past 90 days:  My patient is immunocompromised OR &gt; 65 years old and has one or more COVID-19 high risk factor:</p>

<input type="checkbox"/> remdesivir infusion	<p>100 mg, intravenous, for 60 Minutes, every 24 hours, Starting S+1, For 2 Doses</p> <p>Provide the approximate number of days the patient has had respiratory Covid-19 Symptoms:  Patient has a positive COVID-19 PCR or Antigen result within the last 10 days:  My patient is hospitalized for COVID-19:  My patient is requiring oxygen or increase in baseline oxygen flow due to COVID-19:  My patient has received RDV within the past 90 days:  My patient is immunocompromised OR &gt; 65 years old and has one or more COVID-19 high risk factor:</p>
<input type="checkbox"/> Mild - HMCL Only	<b>"Followed by" Linked Panel</b>
<input type="checkbox"/> remdesivir infusion	<p>200 mg, intravenous, for 60 Minutes, once, For 1 Doses</p> <p>Provide the approximate number of days the patient has had respiratory Covid-19 Symptoms:  Patient has a positive COVID-19 PCR or Antigen result within the last 10 days:  My patient is hospitalized for COVID-19:  My patient is requiring oxygen or increase in baseline oxygen flow due to COVID-19:  My patient has received RDV within the past 90 days:  My patient is immunocompromised OR &gt; 65 years old and has one or more COVID-19 high risk factor:</p>
<input type="checkbox"/> remdesivir infusion	<p>100 mg, intravenous, for 60 Minutes, daily at 1300, Starting S+1, For 2 Doses</p> <p>Provide the approximate number of days the patient has had respiratory Covid-19 Symptoms:  Patient has a positive COVID-19 PCR or Antigen result within the last 10 days:  My patient is hospitalized for COVID-19:  My patient is requiring oxygen or increase in baseline oxygen flow due to COVID-19:  My patient has received RDV within the past 90 days:  My patient is immunocompromised OR &gt; 65 years old and has one or more COVID-19 high risk factor:</p>
<input type="checkbox"/> Mild - HMCCH Only	<b>"Followed by" Linked Panel</b>
<input type="checkbox"/> remdesivir infusion	<p>200 mg, intravenous, for 60 Minutes, once, For 1 Doses</p> <p>Provide the approximate number of days the patient has had respiratory Covid-19 Symptoms:  Patient has a positive COVID-19 PCR or Antigen result within the last 10 days:  My patient is hospitalized for COVID-19:  My patient is requiring oxygen or increase in baseline oxygen flow due to COVID-19:  My patient has received RDV within the past 90 days:  My patient is immunocompromised OR &gt; 65 years old and has one or more COVID-19 high risk factor:</p>
<input type="checkbox"/> remdesivir infusion	<p>100 mg, intravenous, for 60 Minutes, daily at 1000, Starting S+1, For 2 Doses</p> <p>Provide the approximate number of days the patient has had respiratory Covid-19 Symptoms:  Patient has a positive COVID-19 PCR or Antigen result within the last 10 days:  My patient is hospitalized for COVID-19:  My patient is requiring oxygen or increase in baseline oxygen flow due to COVID-19:  My patient has received RDV within the past 90 days:  My patient is immunocompromised OR &gt; 65 years old and has one or more COVID-19 high risk factor:</p>
<input type="checkbox"/> Mild - HMTW Only	<b>"Followed by" Linked Panel</b>

<input type="checkbox"/> remdesivir infusion	200 mg, intravenous, for 30 Minutes, once, For 1 Doses Provide the approximate number of days the patient has had respiratory Covid-19 Symptoms: Patient has a positive COVID-19 PCR or Antigen result within the last 10 days: My patient is hospitalized for COVID-19: My patient is requiring oxygen or increase in baseline oxygen flow due to COVID-19: My patient has received RDV within the past 90 days: My patient is immunocompromised OR > 65 years old and has one or more COVID-19 high risk factor:
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<input type="checkbox"/> remdesivir infusion	100 mg, intravenous, for 60 Minutes, daily, For 2 Doses Provide the approximate number of days the patient has had respiratory Covid-19 Symptoms: Patient has a positive COVID-19 PCR or Antigen result within the last 10 days: My patient is hospitalized for COVID-19: My patient is requiring oxygen or increase in baseline oxygen flow due to COVID-19: My patient has received RDV within the past 90 days: My patient is immunocompromised OR > 65 years old and has one or more COVID-19 high risk factor:
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**remdesivir infusion (3 days) for Post-Transplant Prophylaxis**

Houston Methodist has approved the use of a 3 day course of remdesivir for post-transplant prophylaxis from known COVID-19 positive donors. Restricted to Infectious Diseases and Solid-Organ Transplant providers.

<input type="checkbox"/> Post-Transplant Prophylaxis - HMB Only	<b>"Followed by" Linked Panel</b>
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<input type="checkbox"/> remdesivir infusion	200 mg, intravenous, for 60 Minutes, once, For 1 Doses Remdesivir prescribing is RESTRICTED to Infectious Diseases and Solid-Organ Transplant providers. Are you an ID or Solid-Organ Transplant provider?
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<input type="checkbox"/> remdesivir infusion	100 mg, intravenous, for 60 Minutes, daily at 1500, Starting S+1, For 2 Doses Remdesivir prescribing is RESTRICTED to Infectious Diseases and Solid-Organ Transplant providers. Are you an ID or Solid-Organ Transplant provider?
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<input type="checkbox"/> Post-Transplant Prophylaxis - HMB Only	<b>"Followed by" Linked Panel</b>
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<input type="checkbox"/> remdesivir infusion	200 mg, intravenous, for 60 Minutes, once, For 1 Doses Remdesivir prescribing is RESTRICTED to Infectious Diseases and Solid-Organ Transplant providers. Are you an ID or Solid-Organ Transplant provider?
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<input type="checkbox"/> remdesivir infusion	100 mg, intravenous, for 60 Minutes, daily at 1100, Starting S+1, For 2 Doses Remdesivir prescribing is RESTRICTED to Infectious Diseases and Solid-Organ Transplant providers. Are you an ID or Solid-Organ Transplant provider?
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<input type="checkbox"/> Post-Transplant Prophylaxis - HMW Only	<b>"Followed by" Linked Panel</b>
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<input type="checkbox"/> remdesivir infusion	200 mg, intravenous, for 60 Minutes, once, For 1 Doses Remdesivir prescribing is RESTRICTED to Infectious Diseases and Solid-Organ Transplant providers. Are you an ID or Solid-Organ Transplant provider?
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<input type="checkbox"/> remdesivir infusion	100 mg, intravenous, for 60 Minutes, daily at 1500, Starting S+1, For 2 Doses Remdesivir prescribing is RESTRICTED to Infectious Diseases and Solid-Organ Transplant providers. Are you an ID or Solid-Organ Transplant provider?
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<input type="checkbox"/> Post-Transplant Prophylaxis - HMWB Only	<b>"Followed by" Linked Panel</b>
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<input type="checkbox"/> remdesivir infusion	200 mg, intravenous, for 60 Minutes, once, For 1 Doses Remdesivir prescribing is RESTRICTED to Infectious Diseases and Solid-Organ Transplant providers. Are you an ID or Solid-Organ Transplant provider?
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<input type="checkbox"/>	remdesivir infusion	100 mg, intravenous, for 60 Minutes, daily at 1500, Starting S+1, For 2 Doses Remdesivir prescribing is RESTRICTED to Infectious Diseases and Solid-Organ Transplant providers. Are you an ID or Solid-Organ Transplant provider?
<input type="checkbox"/>	Post-Transplant Prophylaxis - HMSL Only	<b>"Followed by" Linked Panel</b>
<input type="checkbox"/>	remdesivir infusion	200 mg, intravenous, for 60 Minutes, once, For 1 Doses Remdesivir prescribing is RESTRICTED to Infectious Diseases and Solid-Organ Transplant providers. Are you an ID or Solid-Organ Transplant provider?
<input type="checkbox"/>	remdesivir infusion	100 mg, intravenous, for 60 Minutes, every 24 hours, Starting S+1, For 2 Doses Remdesivir prescribing is RESTRICTED to Infectious Diseases and Solid-Organ Transplant providers. Are you an ID or Solid-Organ Transplant provider?
<input type="checkbox"/>	Post-Transplant Prophylaxis - HMCL Only	<b>"Followed by" Linked Panel</b>
<input type="checkbox"/>	remdesivir infusion	200 mg, intravenous, for 60 Minutes, once, For 1 Doses Remdesivir prescribing is RESTRICTED to Infectious Diseases and Solid-Organ Transplant providers. Are you an ID or Solid-Organ Transplant provider?
<input type="checkbox"/>	remdesivir infusion	100 mg, intravenous, for 60 Minutes, daily at 1300, Starting S+1, For 2 Doses Remdesivir prescribing is RESTRICTED to Infectious Diseases and Solid-Organ Transplant providers. Are you an ID or Solid-Organ Transplant provider?
<input type="checkbox"/>	Post-Transplant Prophylaxis - HMCCH Only	<b>"Followed by" Linked Panel</b>
<input type="checkbox"/>	remdesivir infusion	200 mg, intravenous, for 60 Minutes, once, For 1 Doses Remdesivir prescribing is RESTRICTED to Infectious Diseases and Solid-Organ Transplant providers. Are you an ID or Solid-Organ Transplant provider?
<input type="checkbox"/>	remdesivir infusion	100 mg, intravenous, for 60 Minutes, daily at 1000, Starting S+1, For 2 Doses Remdesivir prescribing is RESTRICTED to Infectious Diseases and Solid-Organ Transplant providers. Are you an ID or Solid-Organ Transplant provider?
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<input type="checkbox"/>	remdesivir infusion	100 mg, intravenous, for 60 Minutes, daily, For 2 Doses Remdesivir prescribing is RESTRICTED to Infectious Diseases and Solid-Organ Transplant providers. Are you an ID or Solid-Organ Transplant provider?