

Monday, 20 December 2021

**Antiviral medicines and neutralising monoclonal antibodies (nMABs) Triage Form**

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|  | **Triage question** | **Comment** |
| **Blueteq Questions** | Date of positive COVID-19 PCR test*Must be within 5 days of commencing nMAB or antiviral treatment* | dd/mmm/yyyy |
| Date of onset of symptoms* *Must be within 5 days of commencing nMAB or antiviral treatment*
* *Symptoms of COVID-19 include feverish, chills, sore throat, cough, shortness of breath or difficulty breathing, nausea, vomiting, diarrhoea, headache, red or watery eyes, body aches, loss of taste or smell, fatigue, loss of appetite, confusion, dizziness, pressure or tight chest, chest pain, stomach ache, rash, sneezing, sputum or phlegm, runny nose*
* *Patients who have been symptomatic (within the specified time period) but are no longer symptomatic, clinical judgement should determine suitability for treatment*
 | dd/mmm/yyyy |
| Evidence of ‘Highest Risk’ status* *Patient must be within at least one priority ‘highest’ risk cohorts (****see appendix 1****)*
 | **Tick at least one condition [ ]**  |
| * + **[ ]** *Patients with Down’s Syndrome*
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| * + **[ ]** *Patients with Sickle cell disease*
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| * + **[ ]** *Patients with a solid cancer*
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| * + **[ ]** *Patients with a haematologic malignancy*
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| * + **[ ]** *Patients with renal disease*
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| * + **[ ]** *Patients with liver disease*
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| * + **[ ]** *Patients with immune-mediated inflammatory disorders (IMID)*
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| * + **[ ]** *Patients with primary immune deficiencies*
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| * + **[ ]** *Patients with HIV or AIDS*
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| * + **[ ]** *Solid organ transplant recipients*
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| * + **[ ]** *Patients with rare neurological condition (Multiple sclerosis, Huntington’s chorea, Motor neurone disease or Myasthenia gravis)*
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| * *Patients under the care of specialist teams (e.g., cancer services and those on immunosuppressive treatment) may require further discussion with their consultant to determine suitability for treatment.*
* *Paediatric patients (aged 12-17 years and weigh 40kg+): paediatric MDT assessment may be necessary to determine clinical capacity to benefit from the treatment.*
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|  | **If the patient does not meet the above eligibility criteria on virtual review, STOP here.** |
|  | Assessment of severity of symptoms to confirm the patient does not require hospitalisation |  **[ ]**  |
|  | Vaccination status *To assess for risk of disease progression (may assist clinical decision)* |       |
|  | Allergy history, including any previous history of anaphylaxis*Note, sotrovimab contains polysorbate 80, which has been associated with severe nonimmunologic anaphylactoid reactions.* |       |
|  | Check for swallowing difficulties in view of the large molnupiravir capsule size |  **[ ]**  |
|  | Can the patient travel to the CMDU safely? i.e., can they, or a household member drive them to the CMDU?* *If they are able to travel, an appointment should be made to attend CMDU within the next the 5-day timeframe*
* *If the patient is unable to travel safely, then they should receive molnupiravir.*
 |  **[ ]**  |
| **Blueteq Question** | Could you be or are you planning to become pregnant in the near future? * *Sotrovimab: If patient is pregnant, consider risk assessment with the patient’s obstetrician and specialist team that the patient is under regarding the risks and benefits of treatment. If a patient could be pregnant, advise they will need pregnancy test prior to administration.*
* *Molnupiravir:* ***Do not use during pregnancy****. If a patient could be pregnant, advise they will need pregnancy test prior to administration. Patients of childbearing potential and their partners must be informed that they will need to use a barrier method of contraception during and for four days after completing treatment.*
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|  | Are you breastfeeding? * *Sotrovimab: a risk assessment will need to be made with the patient’s home team regarding the risks and benefits of continuing breastfeeding after treatment with sotrovimab.*
* *Molnupiravir: patients should be advised to stop breastfeeding during and for four days after completing treatment.*
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