W^3: THE WHAT, WHEN, AND WHY OF FORMULARY DECISIONS

WHAT	WHEN	WHY	EFFECTIVE DATE
Ofatumumab (Azerra®)	March 19, 2012	**ADDED WITH RESTRICTION:** Ofatumumab (Azerra®) is a CD20 monoclonal antibody FDA approved for the treatment of chronic lymphocytic leukemia (CLL) refractory to fludarabine and alemtuzumab. There are currently no other FDA-approved therapies that are used in these types of refractory patients. The average cost is $93,000 per treatment course. The Oncology Subcommittee recommended ofatumumab be added to the formulary **restricted** to the FDA-approved indication. **Vials: 100 mg/5 mL**	April 2012
Palonosetron (Aloxi™)	March 19, 2012	**ADDED WITH RESTRICTION**: Palonosetron (Aloxi™) is a selective 5 HT_3 receptor antagonist FDA approved for the prevention of acute nausea and vomiting associated with initial and repeat courses of moderately and highly emetogenic cancer chemotherapy, and prevention of delayed nausea and vomiting associated with initial and repeat courses of moderately emetogenic cancer chemotherapy. Palonosetron was requested by the Gyn-Onc Clinic to prevent delayed nausea and vomiting because it is a one-time injection given prior to chemotherapy that does not need to be continued as an oral formulation following chemotherapy. The cost of palonosetron is $133.34 per dose compared with approximately $0.30 per dose of IV ondansetron. The Oncology Subcommittee recommended that palonosetron be added to the formulary with use **restricted** to the Gyn/Onc clinic ONLY. Palonosetron will not be used inpatient nor stocked in the inpatient pharmacy. **Vials: 0.25 mg/5 mL**	April 2012

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WHAT	WHEN	WHY	EFFECTIVE DATE
Nebulized formoterol (Performist®)	March 19, 2012	**ADDED WITH RESTRICTION:** Nebulized formoterol (Performist®) is a long-acting beta2-adrenergic agonist FDA approved for maintenance treatment of bronchoconstriction in patients with COPD, including emphysema and chronic bronchitis. Currently, nebulized formoterol does not have an FDA indication for the treatment of acute deterioration of COPD, acute or maintenance treatment of asthma. The nebulized formulation offers an alternative not currently available to patients unable to use a dry powder inhaler (eg, very old, poor dexterity or vision). Use of nebulized formoterol is **restricted** to the Pulmonary Service. **Nebulized Solution: 20 mcg/2 mL**	May CPOE update
Tapentadol (Nucynta®)	March 19, 2012	**ADDED WITH RESTRICTION:** Tapentadol (Nucynta®) is an opioid analgesic (CII) FDA approved for relief of moderate-to-severe pain (IR formulation) as well as relief of moderate-to-severe chronic pain when continuous, around-the-clock analgesia is necessary for an extended period of time (ER formulation). Tapentadol's mechanism action is due to mu-opioid agonist activity and the inhibition of norepinephrine reuptake. It is also useful for neuropathic pain and has a favorable GI side effect profile compared with opioids. Use of tapentadol is **restricted** to the Chronic Pain Service. **Immediate-Release Tablets: 50 mg, 75 mg** **Extended-Release Tablets: 50 mg, 100 mg, 250 mg**	May CPOE update
Tranexamic acid injection (Cyklokapron®)	April 16, 2012	**ADDED:** Tranexamic acid (TXA) is an antifibrinolytic agent FDA approved for prevention of hemorrhage in patients with hemophilia; however, it is used off-label for multiple indications. The specific formulary request for tranexamic acid is for use in knee and hip arthroplasty. Although not FDA approved for this indication, the most commonly used dosing for TXA in knee and hip arthroplasty is a 10 to 15 mg/kg infusion prior to surgery, rarely followed by a 1 mg/kg/hr continuous infusion 5 to 6 hours post-operatively. **Vials: 100 mg/mL; 10-mL vial**	May CPOE update

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WHAT	WHEN	WHY	EFFECTIVE DATE
Aflibercept (Eylea®)	April 16, 2012	**ADDED WITH RESTRICTION:** Aflibercept (Eylea®) is a recombinant fusion protein FDA approved for the treatment of neovascular (wet) age-related macular degeneration (AMD). Aflibercept works by binding vascular epithelial growth factor A (VEGF-A) and placental growth factor (PGF), impairing the pro-angiogenic effects of VEGF and PGF. The advantage of aflibercept over other agents for wet AMD (ie, bevacizumab, ranibizumab) is that it is only dosed every 8 weeks as compared with every 4 weeks with other wet AMD agents. Use of aflibercept is **restricted** to Ophthalmology Clinic. **Vials: 2 mg/0.5 mL**	April 2012
CHARTS, GUIDELINES, AND POLICIES			
Policy Update – Medication Management: Prescribing, Dispensing, and Administration of Chemotherapy and Immunotherapy (ADMIN 0188)	March 19, 2012	The following changes were made to the Chemotherapy policy (Admin Policy #0188): • Not include a separate definition for scribe but to clarify that the order must be cosigned by an authorized prescriber of chemotherapy if the order is written and signed by a non-authorized prescriber • Intrathecal chemotherapy independent double-check and Time Out procedures must be done prior to administration and documented in patient chart • Administration of intrathecal chemotherapy in the outpatient setting must be done in designated areas: Adults patients (2nd floor cancer hospital), Pediatric patients (1st floor of hospital clinic) • Handling of Hazardous Drug policy (EHS 0024) must be followed regarding Personal Protective Equipment and disposal • Adult Carboplatin Dosing appendix will be moved to the Web site and out of the policy • Clarification of oral chemotherapy definition as well as development of prepared templates to be pursued for inpatient use	April 2012

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WHAT	WHEN	WHY	EFFECTIVE DATE
CHARTS, GUIDELINES, AND POLICIES			
Policy Update – Medication Management: Prescribing, Dispensing, and Administration of Chemotherapy and Immunotherapy (ADMIN 0188)	March 19, 2012	The following changes were made to the Chemotherapy policy (Admin Policy #0188): • For chemotherapy/immunotherapy drugs on critical shortage, pharmacy will not prepare the drug until lab/clinical clearance has been obtained	April 2012
Order Form Update – Adult and Pediatric Heme/Onc Vaccine Orders	March 19, 2012	The adult and pediatric Heme/Onc vaccine order forms were updated to reflect the recently updated ACIP vaccination guidelines. These forms will be used in the Heme/Onc clinics.	April 2012
Formulary Restriction Change - Methylnaltrexone (Relistor®)	April 16, 2012	The methylnaltrexone (Relistor®) formulary restriction has been updated to allow use in patients on oncology services without requiring a palliative care consult.	May 2012