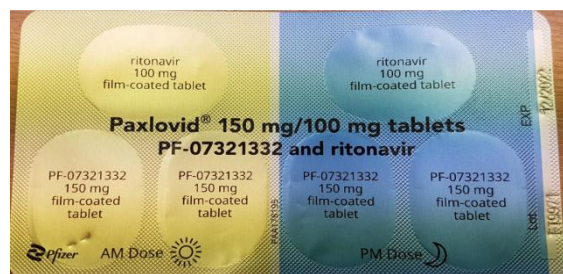


HOW TO PRESCRIBE PAXLOVID® ON A TPAR

Paxlovid should only be prescribed for inpatients eligible as per local guidance.

FULL DOSE: Patients with eGFR ≥ 60 ml/min (CrCl ≥ 60 ml/min if age >75 years)

Dose = PF-07321332 x 2 tablets morning and night + ritonavir 100mg x 1 tablet morning and night

[illegible]

HALF DOSE: Patients with eGFR 30 – 59 ml/min (CrCl 30 – 59 ml/min if age >75 years)

Dose = PF-07321332 x 1 tablet morning and night + ritonavir 100mg x 1 tablet morning and night



Medicine/Form		Before admission	New dose	New medicine
PAXLOVID TABLETS		☐	☐	☒ Duration: 5 DAYS
Reason for change:				
Dose		PF-07321332 150mg x 1 TAB + RITONAVIR 100mg x 1 TAB		
Route		ORAL		
Signature				
Start Date		150222		
Further information		↓ DOSE CKD3		

REDUCED HALF DOSE: Patients with eGFR <30ml/min (CrCl <30ml/min if age >75 years)

OR

Patients ≥40kg and on dialysis

Dose =

DAY 1 PF-07321332 x **2** tablets + ritonavir 100mg x **1** tablet daily



ONCE ONLY PRESCRIPTIONS							
Date	Time	Medicine	Dose	Route	Prescribed By	Time Given	Given By
281222	14 ⁰⁰	PAXLOVID Tablets	2+1	ORAL	BNH		
		(PF-07321332 150mg x 2 TAB + RITONAVIR 100mg x 1 TAB)					

DAY2-5 PF-07321332 x **1** tablet + ritonavir 100mg x **1** tablet daily



Medicine/Form		Before admission ☐		New dose ☐		New medicine ☒	
PAXLOVID TABLETS		Reason for change: ↓ DOSE CKD 5				Duration: 5 DAYS	
Dose	Route	6	8	12	14	18	22
1+1	ORAL	PF-07321332 150mg x 1 TAB + RITONAVIR 100mg x 1 TAB					
Signature	Start Date	X					
BNH	291222						
Further information							
AFTER DIALYSIS							