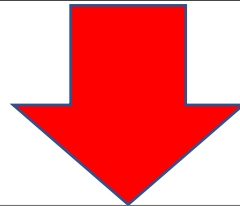


SARS-CoV2 test POSITIVE
AND mild (or asymptomatic) disease
AND < 7 days since onset of symptoms
AND

Patient has received < 3 doses of mRNA vaccine AND meets at least one of:

- Age > 75 years old
- ESRD on dialysis
- Cardiovascular disease (CAD, CHF (NYHA II-IV), arrhythmia)
- Lung disease (moderate-severe asthma, COPD, CF, ILD/pulmonary fibrosis)
- Sickle cell disease or other hemoglobinopathy
- Diabetes
- Pregnancy
- Obesity (BMI ≥35)



Check for drug-drug interactions for Nirmatrelvir/ritonavir (PAXLOVID) vs all current medications

Minor or no interactions and eGFR>30mL/min

nirmatrelvir/ritonavir (Paxlovid) (to be prescribed by MRP - [Prescription link](#))

If eGFR>60mL/min: 300/100mg po BID x 5 days
If eGFR 30-60mL/min: 150/100mg po BID x 5 days
If eGFR<30mL/min: AVOID

Serious risk of interactions or eGFR <30mL/min

Remdesivir

if inpatient, to be prescribed by MRP
if outpatient MUHC, arrange via **ID-AMB/Medical day**

200 mg IV day 1, then 100 mg IV die x 2d
No renal adjustment required

SARS-CoV2 test POSITIVE AND mild (or asymptomatic) disease AND < 7 days since onset of symptoms AND

Patient meets at least one of:

- On chemotherapy for active malignancy
- Recipient of Solid organ or Hematopoietic Stem Cell Transplant (SOT or HSCT)
- Untreated HIV or HIV with CD4<200
- Prednisone > 20mg per day for >2 weeks
- Severe Primary immunodeficiency (CVID, Combined Immunodeficiency [low T cells],..)
- Known hypogammaglobulinemia
- On TNF-blocker or other biologic agent that is immunosuppressive or immunomodulator
- Trisomy 21



Check for drug-drug interactions for Nirmatrelvir/ritonavir (PAXLOVID) vs all current medications

Minor or no interactions *and* eGFR>30mL/min

High risk of interactions *or* eGFR <30mL/min

nirmatrelvir/ritonavir (Paxlovid) (to be prescribed by MRP - [Prescription link](#))

If eGFR>60mL/min: 300/100mg po BID x 5 days
If eGFR 30-60mL/min: 150/100mg po BID x 5 days
If eGFR<30mL/min: AVOID

Remdesivir

if inpatient, to be prescribed by MRP
if outpatient MUHC, arrange via ID-AMB/Medical day

200 mg IV day 1, then 100 mg IV die x 2d
No renal adjustment required

**Procedure for Medical Day Hospital (MDH)
ONLY for patients approved by ID-AMB (“MICRO B”)**

