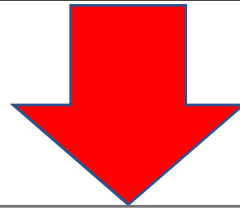


**SARS-CoV2 test POSITIVE**  
**AND mild (or asymptomatic) disease**  
**AND < 7 days since onset of symptoms**  
**AND**

**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  $\geq$ 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**

eGFR > 30mL/min: 200 mg IV day 1, then 100 mg IV die x 2d  
eGFR<30mL/min: 100 mg IV (no loading dose) x 3d

**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

eGFR > 30mL/min: 200 mg IV day 1, then 100 mg IV die x 2d  
eGFR<30mL/min: 100 mg IV (no loading dose) x 3d

AND

AND

if did not receive Tixagevimab/cilgavimab (Evusheld) prophylaxis in preceding 6 months, ADD:  
**Tixagevimab 300mg and cilgavimab 300mg IM x 1**

If did not receive Evusheld prophylaxis in preceding 6 months, ADD:  
**Tixagevimab 300mg and cilgavimab 300mg IM x 1**  
if received evusheld: consider doing anti-SARS-CoV2 serology and giving tixagevimab/cilgavimab if serology negative

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

