



Breastfeeding see section 3

Review patient's medical history:

NO

- Check for a current compliance aid and who monitors it e.g. patient, carer, pharmacy
- Gather a full medication list including prescribed, over-the-counter, supplementary / herbal medications and any illicit / recreational drugs.

Click here to use the Liverpool Interaction Checker

NO

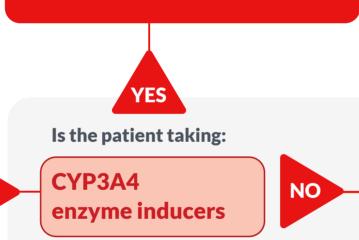
Click to view

YES

Is the patient taking any interacting medications?



Do not use Paxlovid in patients who are or have recently been taking CYP3A4 enzyme inducers.



It may be possible to give Paxlovid to patients who are already taking medicines that are CYP3A4 substrates. Depending on the indication, therapeutic index and half-life of the CYP3A4 substrate, it may be safe to withhold, dose adjust, or continue the medication, with close monitoring of the patient.

Amiodarone Pethidine Bosentan Carbamazepine **Primidone** Ciclosporin **Phenytoin** Clozapine Clonazepam **Rifampicin** Colchicine **Disopyramide Enzalutamide Sirolimus Eplerenone** Flecainide **Tacrolimus** Ivabradine **Tadalafil Midazolam (oral) Ticagrelor**



D

Is the patient taking... any of these common medications which interact:

lfuzosin	Rivaroxaban
pixaban	Rosuvastatin
torvastatin	Salmeterol
)iazepam	Simvastatin
Omperidone	
ercanidipine	

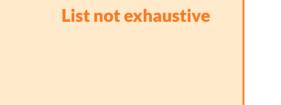
Phenobarbitone Quetiapine Sildenafil (pulmonary hyptertension) St John's Wort



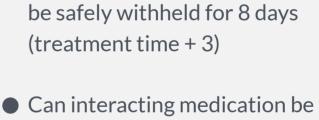
Paxlovid is a suitable medication for this patient

Click here to view the Taskforce

Paxlovid guidance



YES



safely dose adjusted?

• Is monitoring for adverse reactions possible when interacting medicines are used concurrently?



Pregnancy and conception:



Section 2

Category B3. Do not use in

pregnant women unless eligible to be enrolled in trials. Women of childbearing potential should avoid becoming pregnant during treatment and for a period of 7 days after last dose.

Breastfeeding: Section 3



Do not use in breastfeeding women unless eligible to be enrolled in trials. Breastfeeding can commence 7 days after the last dose.

Consider if the following can be done safely and is suitable based on the specific drug interaction:

• Can interacting regular medicines

no known interactions with **Paxlovid**:

These medications have

ACE inhibitors Acid reducing agents (antacids, PPIs and H2Ras) Aspirin Azathioprine **Beta Blockers Contraceptives/HRT Corticosteroids (oral/inhaled/topical) Fluvastatin** Frusemide Gabapentin Immunoglobulin **Inhalers (except salmeterol)** Insulin Levothyroxine Metformin Methotrexate **Monoclonal antibodies (MABs) Mycophenolate** NSAIDS (except piroxicam)

Consent and prescribe: Ensure consent from patient or medical treatment decision maker. Prescribe dose based on kidney function If eGFR ≥ 60ml/min: Nirmatrelvir 300mg (2 x 150mg) + ritonavir 100mg BD for 5 days

Developed in collaboration with



Department of Health

NO



If eGFR 30-60ml/min: Nirmatrelvir 150mg (1 x 150mg) + ritonavir 100mg BD for 5 days