Use this checklist to determine if a patient meets the restrictions for funding in the **hospital setting**. For more details, refer to Section H of the Pharmaceutical Schedule. For community funding, see the Special Authority Criteria.

PRESCRIB	ER	PATIENT:
Name:		Name:
Ward:		NHI:
Rituximal	b (Mabthera)	
Re-assessr Prerequisi	N – rheumatoid arthritis - prior TNF inhibitor use ment required after 4 months tes (tick boxes where appropriate)	
	rescribed by, or recommended by a rheumatologist, or in accordan lospital.	ce with a protocol or guideline that has been endorsed by the Health NZ
	O The patient has had an initial community Special Authority approval for at least one of etanercept and/or adalimumab rheumatoid arthritis	
	or	ts from a reasonable trial of adalimumab and/or etanercept o and/or etanercept, the patient did not meet the renewal criteria for nritis
and		
	O Rituximab to be used as an adjunct to methotrexate or le	eflunomide therapy
	O Patient is contraindicated to both methotrexate and leflu	nomide, requiring rituximab monotherapy to be used
and	Maximum of two 1,000 mg infusions of rituximab given two we	eks apart

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Signed.	Date:	
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HOSPITAL MEDICINES LIST RESTRICTIONS CHECKLIST

May 2024

Use this checklist to determine if a patient meets the restrictions for funding in the **hospital setting**. For more details, refer to Section H of the Pharmaceutical Schedule. For community funding, see the Special Authority Criteria.

PRESCRIBER				PATIENT:	
lame:	ame: Name:				
Vard:				NHI:	
litux	imal	b (N	1abthe	era) - continued	
				natoid arthritis - TNF inhibitors contraindicated uired after 4 months	
Prere	quisi	tes	(tick b	poxes where appropriate)	
and		resc osp		by, or recommended by a rheumatologist, or in accordance with a protocol or guideline that has been endorsed by the Health NZ	
	and)	Treat	tment with a Tumour Necrosis Factor alpha inhibitor is contraindicated	
	O Patient has had severe and active erosive rheumatoid arthritis (either confirmed citrullinated peptide (CCP) antibody positive) for six months duration or longer			ent has had severe and active erosive rheumatoid arthritis (either confirmed by radiology imaging, or the patient is cyclic linated peptide (CCP) antibody positive) for six months duration or longer	
	and (C		ent has tried and not responded to at least three months of oral or parenteral methotrexate at a dose of at least 20 mg weekly or a mum tolerated dose	
	and	O		ent has tried and not responded to at least three months of oral or parenteral methotrexate in combination with sulfasalazine and oxychloroquine sulphate (at maximum tolerated doses)	
		~	0	Patient has tried and not responded to at least three months of oral or parenteral methotrexate in combination with the maximum tolerated dose of cyclosporin	
		or	0	Patient has tried and not responded to at least three months of oral or parenteral methotrexate in combination with intramuscular gold	
		01	0	Patient has tried and not responded to at least three months of therapy at the maximum tolerated dose of leflunomide alone or in combination with oral or parenteral methotrexate	
	and		_		
		or	\bigcirc	Patient has persistent symptoms of poorly controlled and active disease in at least 20 swollen, tender joints	
			0	Patient has persistent symptoms of poorly controlled and active disease in at least four joints from the following: wrist, elbow, knee, ankle, and either shoulder or hip	
	and				
		or	O	Patient has a C-reactive protein level greater than 15 mg/L measured no more than one month prior to the date of this application	
			0	C-reactive protein levels not measured as patient is currently receiving prednisone therapy at a dose of greater than 5 mg per day and has done so for more than three months	
	and				
		or	\bigcirc	Rituximab to be used as an adjunct to methotrexate or leflunomide therapy	
	and		Maxi	Patient is contraindicated to both methotrexate and leflunomide, requiring rituximab monotherapy to be used mum of two 1,000 mg infusions of rituximab given two weeks apart	
			_4		

I confirm that the above details are correct:	
Signed:	Date:

HOSPITAL MEDICINES LIST RESTRICTIONS CHECKLIST

Use this checklist to determine if a patient meets the restrictions for funding in the **hospital setting**. For more details, refer to Section H of the Pharmaceutical Schedule. For community funding, see the Special Authority Criteria.

intuximab (Mabhera) - continued **ONTINUATION - rheumatoid arthritis - re-treatment in 'partial responders' to rituximab (Mabhera) - continued **ONTINUATION - rheumatoid arthritis - re-treatment in 'partial responders' to rituximab (Maximum of two 1,000 mg infusions of rituximab infusions the patient had between a 30% and 50% decrease in active joint count from baseline and a clinically significant response to reatment in the opinion of the physician of the p	RESCRIBER			PATIENT:
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I confirm that the above details are correct:

Signed: Date: