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.

PRESCRIBER	PA	ATIENT:
Name:	Na	ame:
Ward:	NI	HI:
Rituximab (Mabthe	era)	
Re-assessment requi	natoid arthritis - prior TNF inhibitor use ired after 4 months oxes where appropriate)	
and	The patient has had an initial community Special Authority a rheumatoid arthritis	approval for at least one of etanercept and/or adalimumab for
or		rom a reasonable trial of adalimumab and/or etanercept nd/or etanercept, the patient did not meet the renewal criteria for s
and		
	Rituximab to be used as an adjunct to methotrexate or leflu	nomide therapy
	Patient is contraindicated to both methotrexate and leflunon	nide, requiring rituximab monotherapy to be used
and O Maxir	mum of two 1,000 mg infusions of rituximab given two weeks	s apart

I confirm that the above details are correct:

Signed: Date:

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CRIB	ER		PATIENT:
:			
			NHI:
cimal	b (M	labthe	era) - continued
ssessr	ment	t requ	natoid arthritis - TNF inhibitors contraindicated ired after 4 months oxes where appropriate)
and)	Treat	ment with a Tumour Necrosis Factor alpha inhibitor is contraindicated
(nt 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		nt 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 (and			nt 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
	or	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	0	Patient has persistent symptoms of poorly controlled and active disease in at least 20 swollen, tender joints
		\bigcirc	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			
		0	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
	or	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	0	Rituximab to be used as an adjunct to methotrexate or leflunomide therapy
		0	Patient is contraindicated to both methotrexate and leflunomide, requiring rituximab monotherapy to be used
and	_		

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	2	PATIENT:
:		Name:
		NHI:
cimab ((Mabth	era) - continued
ssessme	ent requ	heumatoid arthritis - re-treatment in 'partial responders' to rituximab ired after 4 months poxes where appropriate)
0	or o	At 4 months following the initial course of rituximab infusions the patient had between a 30% and 50% decrease in active joint count from baseline and a clinically significant response to treatment in the opinion of the physician
o	r \sim	At 4 months following the second course of rituximab infusions the patient had at least a 50% decrease in active joint count from baseline and a clinically significant response to treatment in the opinion of the physician
	O	At 4 months following the third and subsequent courses of rituximab infusions, the patient demonstrates at least a continuing 30% improvement in active joint count from baseline and a clinically significant response to treatment in the opinion of the physician
and one	Ritu	rimab re-treatment not to be given within 6 months of the previous course of treatment
o		Rituximab to be used as an adjunct to methotrexate or leflunomide therapy
	\bigcirc	Patient is contraindicated to both methotrexate and leflunomide, requiring rituximab monotherapy to be used
and	Max	mum of two 1,000 mg infusions of rituximab given two weeks apart
TINUATI	ION – ı ent requ	mum of two 1,000 mg infusions of rituximab given two weeks apart heumatoid arthritis - re-treatment in 'responders' to rituximab pired after 4 months poxes where appropriate)
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