

Pharmacy Update | Outpatient Treatment of COVID-19

Dear :

With hydroxychloroquine and chloroquine featuring prominently in recent news about the COVID-19 outbreak, we are sharing some information and recommendations related to these agents with you.

Please note: Governor Cuomo signed an executive order on 3/23/20 that restricts the dispensing of hydroxychloroquine or chloroquine except when prescribed for FDA approved indication(s) (most retail chains are restricting these prescriptions to a 30-day supply) or as part of a clinical trial for COVID-19 (the prescription will need have the positive test result documented on the prescription and will be restricted to a 14 day supply). Details can be found [here](#).

We recommend adding the indication for outpatient prescriptions to the SIG for all hydroxychloroquine or chloroquine prescriptions and adjust the days supply to meet current restrictions.

Frequently asked Question Related to *Outpatient Treatment of COVID-19*:

Q: Should outpatients with suspected or confirmed COVID-19 be treated with pharmacotherapeutic agents?

A: No. There are no therapies proven effective for the treatment of COVID-19. Patients who remain outpatient and have mild COVID-19 related symptoms should be monitored closely for progression and offered supportive care.

Recommendation: We are following the recommendations of the CDC for treatment closely based on the rapidly evolving evidence. At this time, treatment of outpatients with commercially available agents (hydroxychloroquine, azithromycin, lopinavir/ritonavir) is not recommended.

Frequently asked Questions Related to *Prevention of COVID-19*:

Q: Should post-exposure prophylaxis be prescribed for people who may have been exposed to COVID-19?

A: No. There are no FDA approved agents at this time for post-exposure prophylaxis for people who have been exposed to COVID-19. This includes antimalarial drugs hydroxychloroquine and chloroquine. Data with these agents remains limited to *in vitro* data demonstrating activity against SARS-CoV-2 and published reports from China's experience suggesting efficacy in small *in vivo* studies for patients with COVID-19 associated pneumonia (Gao J, et al. *BioScience Trends* 2020;14(1):72-3).

Recommendation: We are following the recommendations of the CDC for prophylaxis closely based on the rapidly evolving evidence. At this time, prophylaxis is not recommended in persons with potential COVID-19 exposure. Hydroxychloroquine and chloroquine should not be prescribed "just in case" or to those who are in self-isolation to take should they test positive for COVID-19 or

start to show symptoms. Everyone must help to preserve our local and national supply.

Q: What can be done for healthcare workers or household contacts exposed to COVID-19?

A: The University of Minnesota is conducting an ongoing post-exposure prophylaxis clinical trial for healthcare workers or household contacts exposed to a COVID-19 positive patient (inclusion criteria is exposure within the last 72 hours). See [here](#) for additional details or [contact the trial's organizers](#) for more information.

For the full archive of AHP's COVID-19 related content, click [here](#). Included in our archive is a recent article about [COVID-19 and commonly prescribed drugs](#).

As always, we welcome any questions or feedback you may have. Just [email](#) the Pharmacy Team today.



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