Oxazolidinone Antibiotics

Goal(s):
- To optimize treatment of infections due to gram-positive organisms such as methicillin-resistant Staphylococcus aureus (MRSA) and vancomycin-resistant Enterococcus faecium (VRE)

Length of Authorization:
- 6 days

Requires PA:
- Non-preferred Oxazolidinone antibiotics

Covered Alternatives:
- Current PMPDP preferred drug list per OAR 410-121-0030 at www.orpdl.org
- Searchable site for Oregon FFS Drug Class listed at www.orpdl.org/drugs/

Approval Criteria

<table>
<thead>
<tr>
<th>Approval Criteria</th>
<th>Decision</th>
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<tbody>
<tr>
<td>1. What diagnosis is being treated?</td>
<td>Record ICD-10 code.</td>
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<tr>
<td>2. Does the patient have an active infection with suspected or documented MRSA (e.g. B95.8, B95.61, B95.62, J15212) or VRE (e.g. Z16.20, Z16.21, Z16.22, Z16.31, Z16.32, Z16.33, Z16.39) or other multi-drug resistant gram-positive cocci (e.g. Z16.30, Z16.24)?</td>
<td>Yes: Go to #3.</td>
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<td>3. Does the patient have a documented trial of appropriate therapy with vancomycin or linezolid, or is the organism not susceptible?</td>
<td>Yes: Approve tedizolid for up to 6 days and other non-preferred drugs for prescribed course.</td>
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P&T/DUR Review: 5/15
Implementation 7/1/15