

Baricitinib (Olumiant®) Access Form

Hospitalised for management of COVID-19

Write in CAPITAL LETTERS or use addressograph

Surname: _____

First names: _____

Health and Care No: _____

DOB: _____

Ward/Department: _____

Weight: _____ eGFR: _____

Allergies / Medicine sensitivities

This section must be completed before prescribing and administration except in exceptional circumstances

Date of Reaction	Medicine/allergen	Type of reaction (eg. rash)	Signature/ designation/ date

OR

No known allergies (Please tick)

Signature / Designation: _____

Date: _____

Inclusion Criteria (ALL MUST APPLY)	Indicate Yes or No
SARS-CoV-2 infection is confirmed by microbiological test OR MDT has a high level of confidence that the clinical and/or radiological features suggest that COVID-19 is the most likely diagnosis	
Hospitalised specifically for the management of COVID-19 symptoms Or Hospital-onset and symptoms are such, that they would have prompted a hospital admission for management of COVID-19 symptoms	
Viral pneumonia syndrome is present	
Requiring supplemental oxygen or respiratory support for the treatment of COVID-19	
Receiving dexamethasone or an equivalent corticosteroid unless contraindicated	
Exclusion Criteria (Patients are not eligible if they meet any of the following)	Indicate Yes or No
Age less than 2 years	
Known hypersensitivity reaction to the active substances or any excipients of Baricitinib as listed in the Summary of Product Characteristics (SmPC) for GB and NI.	
Age 9 years and above estimated glomerular filtration rate (eGFR) <15 ml/min/1.73m ² Or Age 2 to 8 years estimated glomerular filtration rate (eGFR)<30ml/min/1.73m ²	
Receiving dialysis or haemofiltration	
Absolute neutrophil count (ANC) less than 0.5 x 10 ⁹ cells/L	
Active tuberculosis	
Pregnancy or breastfeeding	

Interactions

There is no interaction expected between baricitinib with the other commissioned COVID-19 treatments. Baricitinib **can interact with strong Organic Anion Transporter 3 (OAT3) inhibitors such as probenecid**. For further information please visit the University of Liverpool COVID-19 Drug Interactions website ([University of Liverpool COVID-19 Drug Interaction checker](#)) and [Olumiant 4 mg Film-Coated Tablets - Summary of Product Characteristics \(SmPC\) - \(emc\) \(medicines.org.uk\)](#)

Renal and Hepatic impairment

No dose adjustment is required in patients with mild or moderate hepatic impairment. Baricitinib (Olumiant®) is not recommended for use in patients with severe hepatic impairment.

Caution and clinical judgement is required in patients with unstable renal function in the context of acute kidney injury. Refer to Dose and administration section for further information on adjustments required depending on renal impairment.

Pregnancy and breast feeding

Baricitinib (Olumiant®) is contraindicated during pregnancy. Women of childbearing potential must use effective contraception during and for at least 1 week after treatment. Baricitinib (Olumiant®) must not be used during breast-feeding. More information regarding pregnancy and breast feeding is provided in the Interim Clinical Commissioning Policy referenced below.

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Drug	Age (years)	eGFR ml/min/1.73m ²	Dose, frequency and duration (For all doses discontinue at discharge if sooner than 10 days)	Tick required dose
Baricitinib Olumiant®	≥ 9	≥ 60	4mg once daily for 10 days	
	≥ 9	30 to < 60	2mg once daily for 10 days	
	≥ 9	15 to < 30	2mg on alternate days for 10 days	
	2 to 8	≥ 60	2mg once daily for 10 days	
	2 to 8	30 to < 60	2mg on alternate days for 10 days	

All doses of baricitinib should be halved if co-administration of an Organic Anion Transporter 3 (OAT3) inhibitor with a strong inhibition potential, such as probenecid is required. If the recommended baricitinib dose is 2mg on alternate days consider discontinuing Strong OAT3 inhibitor. [University of Liverpool COVID-19 Drug Interaction checker](#)

Notes for prescriber:

- Baricitinib can be taken with or without food, and may be taken at any time. Do not crush. For patients with swallowing difficulties or enteral feeding tubes see separate guidance on Trust Sharepoint. [Baricitinib - All Documents](#)
- If a patient is already taking baricitinib for a licensed indication refer to the Interim Clinical Commissioning Policy referenced below for further information.
- Baricitinib should not **routinely** be co-administered (simultaneously) with an IL-6 inhibitor. However, a patient may be given an IL-6 inhibitor after treatment with baricitinib has been commenced (or vice versa), according to clinical judgement. In the situation of illness requiring critical care support or where a patient has deteriorated despite treatment co-administration may be appropriate.
- Discharge letters should record that baricitinib has been given during admission, together with the dose and dates of administration.

Consultant's Signature: _____ Consultant's Name: _____	Date:
GMC _____ Contact No: _____	

Pharmacy Section:

Scanned copies to be sent to pharmacy, after clinical check on ward. If not clinically checked on ward, original must be sent to Pharmacy Department. Label with code "COBAR (To be taken as per in-patient drug Kardex. FOR ALL DOSES DISCONTINUE AT DISCHARGE).

CC		LAB		DISP		FC		DATE	
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