



MISSISSIPPI STATE DEPARTMENT OF HEALTH

**This is an official
MS Health Alert Network (HAN) Alert**

MESSAGE ID: MSHAN-20220121-00551-ALT (Health Alert)
RECIPIENTS: All Physicians, Hospitals, ERs, ICPs, NPs, and
Healthcare Providers – Statewide
Friday, January 21, 2022
SUBJECT: COVID-19 Therapeutics

Dear Colleagues,

COVID-19 Therapeutics

1. Consistent reporting of utilization of monoclonal antibodies and oral antiviral medications is very important. Reporting to HHS and MSDH impacts your distribution of our state's allocation of COVID-19 therapeutic products.
 - a. Administration and on-hand inventory of Regen-COV, bamlanivimab/etesevimab, and sotrovimab should be reported **weekly** in HHS Protect/Teletracking.
 - b. Administration, on-hand inventory, and product requests for Regen-COV, bamlanivimab/etesevimab, and sotrovimab should be entered **weekly (Tuesdays)** through the MSDH REDCap Survey.
 - c. Administration and on-hand inventory of Evusheld, Paxlovid, and molnupiravir should be reported at the **end of every business day** in the Health Provider Order Portal (HPOP).
2. Product is in short supply, so the standing order for monoclonal antibodies is no longer in effect. Patients should be triaged and clinically evaluated by a provider or physician in order to receive monoclonal antibodies or oral antivirals for COVID-19.
3. For a provider to select the best treatment option for individuals who will receive the greatest benefit from therapy given supply constraints, the following should be considered:
 - a. Your facility's availability of monoclonal antibodies, Molnupiravir and Paxlovid. Because Mississippi's allocation is small, MSDH is distributing the very limited supply of monoclonal antibodies and oral antivirals to hospital Centers of Excellence and Federally Qualified Health Centers in the state at this time.
 - b. Feasibility of parenteral administration of monoclonal antibodies
 - c. Drug-drug interactions (please review Paxlovid EUA)
 - d. Renal function (please review Paxlovid EUA)
 - e. Regional prevalence of Omicron. Based on current data, Omicron is the predominant strain of SARS-CoV-2 in Mississippi. [COVID-19 Data Reports - Mississippi State Department of Health \(ms.gov\)](#)
 - f. High risk indications in each individual (refer to tiered risk groups in graphic below).



- g. Clinical decision guide for COVID-19 treatment: [Adult or pediatric \(age 12 and older and weight 40kg or greater\) with mild to moderate COVID-19 & high risk for progression to severe disease \(phe.gov\)](#)
- 4. Prioritize treatment over post-exposure prophylaxis
- 5. Use of REGEN-COV and bamlanivimab/etesevimab may be considered in limited cases as some areas of the state continues to see a small portion of Delta variant cases. However, it is important to note that these two mAbs are not effective against Omicron, and providers should use clinical discretion when making decisions to administer them.

Please use this resource as a guide for implementing COVID-19 therapeutics into your practice: <https://www.phe.gov/emergency/events/COVID19/investigation-MCM/Documents/USG-COVID19-Tx-Playbook.pdf>.

COVID-19 Treatment Guidelines When There Are Logistical or Supply Constraints

Tier	Risk Group
1	Immunocompromised individuals not expected to mount an adequate immune response to COVID-19 vaccination or SARS-CoV-2 infection due to their underlying conditions, regardless of vaccine status (see Immunocompromising Conditions below); or Unvaccinated individuals at the highest risk of severe disease (anyone aged ≥75 years or anyone aged ≥65 years with additional risk factors).
2	Unvaccinated individuals at risk of severe disease not included in Tier 1 (anyone aged ≥65 years or anyone aged <65 years with clinical risk factors)
3	Vaccinated individuals at high risk of severe disease (anyone aged ≥75 years or anyone aged ≥65 years with clinical risk factors) Note: Vaccinated individuals who have not received a COVID-19 vaccine booster dose are likely at higher risk for severe disease; patients in this situation within this tier should be prioritized for treatment.
4	Vaccinated individuals at risk of severe disease (anyone aged ≥65 years or anyone aged <65 with clinical risk factors) Note: Vaccinated individuals who have not received a COVID-19 vaccine booster dose are likely at higher risk for severe disease; patients in this situation within this tier should be prioritized for treatment.

<https://www.covid19treatmentguidelines.nih.gov/therapies/statement-on-patient-prioritization-for-outpatient-therapies/>

UNCLASSIFIED / FOR PUBLIC DISTRIBUTION

Vaccination

- 1. Continue to promote COVID-19 vaccination and boosters.
- 2. Clearly communicate when vaccinations are available in your facility and age group information respective to the different products.

Resources:

- Sotrovimab: <https://www.fda.gov/media/149534/download>
- Molnupiravir: <https://www.merck.com/eua/molnupiravir-hcp-fact-sheet.pdf>
- Paxlovid: <https://www.fda.gov/media/155050/download>

Please email C19Therapeutics@msdh.ms.gov with any questions or concerns.

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Alerting Message Specification Settings

Originating Agency:	Mississippi State Department of Health
Alerting Program:	MS Health Alert Network (MS HAN)
Message Identifier:	MSHAN-20220121-00551-ALT
Program (HAN) Type:	Health Alert
Status (Type):	Actual ()
Message Type:	Alert
Reference:	MSHAN-00551
Severity:	Unknown
Acknowledgement:	No
Sensitive:	Not Sensitive
Message Expiration:	Undetermined
Urgency:	Undetermined
Delivery Time:	600 minutes

Definition of Alerting Vocabulary and Message Specification Settings

Originating Agency:	A unique identifier for the agency originating the alert.
Alerting Program:	The program sending the alert or engaging in alerts and communications using PHIN Communication and Alerting (PCA) as a vehicle for their delivery.
Message Identifier:	A unique alert identifier that is generated upon alert activation (MSHAN-yyymmdd-hhmm-TTT (ALT=Health Alert , ADV=Health Advisory , UPD=Health Update , MSG/INFO=Message/Info Service)).
Program (HAN) Type:	Categories of Health Alert Messages.
Health Alert:	Conveys the highest level of importance; warrants immediate action or attention.
Health Advisory:	Provides important information for a specific incident or situation; may not require immediate action.
Health Update:	Provides updated information regarding an incident or situation; unlikely to require immediate action.
Health Info Service:	Provides Message / Notification of general public health information; unlikely to require immediate action.
Status (Type):	
Actual:	Communication or alert refers to a live event
Exercise:	Designated recipients must respond to the communication or alert
Test:	Communication or alert is related to a technical, system test and should be disregarded
Message Type:	
Alert:	Indicates an original Alert
Update:	Indicates prior alert has been Updated and/or superseded



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Cancel: Indicates prior alert has been cancelled
Error: Indicates prior alert has been retracted

Reference: For a communication or alert with a Message Type of “Update” or “Cancel”, this attribute contains the unique Message Identifier of the original communication or alert being updated or cancelled. “n/a” = Not Applicable.

Severity:

Extreme: Extraordinary threat to life or property
Severe: Significant threat to life or property
Moderate: Possible threat to life or property
Minor: Minimal threat to life or property
Unknown: Unknown threat to life or property

Acknowledgement: Indicates whether an acknowledgement on the part of the recipient is required to confirm that the alert was received, and the timeframe in which a response is required (Yes or No).

Sensitive:

Sensitive: Indicates the alert contains sensitive content
Not Sensitive: Indicates non-sensitive content

Message Expiration: Undetermined.

Urgency: Undetermined. Responsive action should be taken immediately.

Delivery Time: Indicates the timeframe for delivery of the alert (15, 60, 1440, 4320 minutes (.25, 1, 24, 72 hours)).