

PA Criteria	Criteria Details
<p><b>Description</b></p>	<p>Bevacizumab is a vascular endothelial growth factor-specific angiogenesis inhibitor.</p> <p>Brand Name: <b>Avastin</b><sup>®</sup></p> <p>Biosimilars:</p> <ul style="list-style-type: none"> <li>• <b>Almysys</b> (bevacizumab-maly)</li> <li>• <b>Jobevne</b> (bevacizumab-nwgd)</li> <li>• <b>Mvasi</b> (bevacizumab-awwb)</li> <li>• <b>Vegzelma</b> (bevacizumab-adcd)</li> <li>• <b>Zirabev</b> (bevacizumab-bvzr)</li> </ul>
<p><b>Covered Uses</b> (FDA approved indication)</p>	<p>Bevacizumab is indicated for the treatment of:</p> <ul style="list-style-type: none"> <li>• Metastatic colorectal cancer, in combination with IV fluorouracil-based chemotherapy for first- or second-line treatment.</li> <li>• Metastatic colorectal cancer, in combination with fluoropyrimidine- irinotecan- or fluoropyrimidine-oxaliplatin-based chemotherapy for second-line treatment in patients who have progressed on a first-line bevacizumab product-containing regimen. <ul style="list-style-type: none"> <li>» Note: Avastin is not indicated for adjuvant treatment of colon cancer.</li> </ul> </li> <li>• Unresectable, locally advanced, recurrent or metastatic non-squamous non-small cell lung cancer, in combination with carboplatin and paclitaxel for first-line treatment.</li> <li>• Recurrent glioblastoma in adults.</li> <li>• Metastatic renal cell carcinoma in combination with interferon alfa.</li> <li>• Persistent, recurrent, or metastatic cervical cancer, in combination with paclitaxel and cisplatin, or paclitaxel and topotecan.</li> <li>• Epithelial ovarian, fallopian tube, or primary peritoneal cancer: <ul style="list-style-type: none"> <li>» in combination with carboplatin and paclitaxel, followed by Avastin as a single agent, for stage III or IV disease following initial surgical resection.</li> <li>» in combination with paclitaxel, pegylated liposomal doxorubicin, or topotecan for platinum-resistant recurrent disease who received no more than two prior chemotherapy regimens.</li> <li>» in combination with carboplatin and paclitaxel or carboplatin and gemcitabine, followed by Avastin as a single agent, for platinum-sensitive recurrent disease.</li> </ul> </li> <li>• Hepatocellular Carcinoma (HCC): in combination with atezolizumab for the treatment of patients with unresectable or metastatic HCC who have not received prior systemic therapy.</li> </ul> <p>Additional NCCN Guidelines recommended indications (off-label):</p> <ul style="list-style-type: none"> <li>• Metastatic, HER2 negative breast cancer – used as first-line chemotherapy in combination with paclitaxel or paclitaxel protein-bound.</li> <li>• Post-radiation necrosis of the central nervous system.</li> <li>• Advanced or metastatic small bowel adenocarcinoma in combination with a 5-FU based regimen (including capecitabine) and bevacizumab used as initial therapy.</li> <li>• Advanced, recurrent or metastatic vulvar cancer in combination with paclitaxel and either cisplatin or carboplatin.</li> </ul>

	<ul style="list-style-type: none"> <li>Advanced or recurrent endometrial carcinoma used in combination with carboplatin and paclitaxel – OR – following combination therapy with carboplatin and paclitaxel, bevacizumab is used as single-agent maintenance therapy until disease progression or prohibitive toxicity.</li> <li>Unresectable malignant mesothelioma, in combination chemotherapy with pemetrexed or with either cisplatin or carboplatin.</li> <li>Soft Tissue Sarcoma as single agent for angiosarcoma or in combination with temozolomide for treatment of solitary fibrous tumor.</li> </ul>																				
<b>Dosing and Administration</b>	<table border="1"> <thead> <tr> <th data-bbox="487 562 803 619">Dosing</th> <th data-bbox="803 562 1529 619">Dosing Regimen</th> </tr> </thead> <tbody> <tr> <td data-bbox="487 619 803 835">Metastatic colorectal cancer</td> <td data-bbox="803 619 1529 835"> <ul style="list-style-type: none"> <li>5 mg/kg IV infusion every two weeks with bolus-IFL</li> <li>10 mg/kg IV infusion every two weeks with FOLFOX4</li> <li>5 mg/kg IV infusion every two weeks or 7.5 mg/kg every three weeks with fluoropyrimidine-irinotecan- or fluoropyrimidine-oxaliplatin-based chemotherapy after progression on a first-line bevacizumab product-containing regimen</li> </ul> </td> </tr> <tr> <td data-bbox="487 835 803 909">1st Line Non-Squamous NSCLC</td> <td data-bbox="803 835 1529 909"> <ul style="list-style-type: none"> <li>15 mg/kg IV infusion every three weeks with carboplatin and paclitaxel</li> </ul> </td> </tr> <tr> <td data-bbox="487 909 803 947">Recurrent Glioblastoma</td> <td data-bbox="803 909 1529 947"> <ul style="list-style-type: none"> <li>10 mg/kg IV infusion every two weeks</li> </ul> </td> </tr> <tr> <td data-bbox="487 947 803 1020">Metastatic Renal Cell Carcinoma</td> <td data-bbox="803 947 1529 1020"> <ul style="list-style-type: none"> <li>10 mg/kg IV infusion every two weeks with interferon alfa</li> </ul> </td> </tr> <tr> <td data-bbox="487 1020 803 1094">Persistent, recurrent or metastatic cervical cancer</td> <td data-bbox="803 1020 1529 1094"> <ul style="list-style-type: none"> <li>15 mg/kg IV infusion every three weeks with paclitaxel and cisplatin, or paclitaxel and topotecan</li> </ul> </td> </tr> <tr> <td data-bbox="487 1094 803 1230">Stage 3 or 4 epithelial ovarian, fallopian tube or primary peritoneal cancer following surgical resection</td> <td data-bbox="803 1094 1529 1230"> <ul style="list-style-type: none"> <li>15 mg/kg IV infusion every three weeks with carboplatin and paclitaxel for up to six cycles, followed by 15 mg/kg every three weeks as a single agent, for a total of up to 22 cycles</li> </ul> </td> </tr> <tr> <td data-bbox="487 1230 803 1367">Platinum-resistant recurrent epithelial ovarian, fallopian tube or primary peritoneal cancer</td> <td data-bbox="803 1230 1529 1367"> <ul style="list-style-type: none"> <li>10 mg/kg IV infusion every two weeks with paclitaxel, pegylated liposomal doxorubicin, or topotecan given every week</li> <li>15 mg/kg IV infusion every three weeks with topotecan given every three weeks</li> </ul> </td> </tr> <tr> <td data-bbox="487 1367 803 1577">Platinum-sensitive recurrent epithelial ovarian, fallopian tube, or primary peritoneal cancer</td> <td data-bbox="803 1367 1529 1577"> <ul style="list-style-type: none"> <li>15 mg/kg IV infusion every three weeks with carboplatin and paclitaxel for six to eight cycles, followed by 15 mg/kg every three weeks as a single agent</li> <li>15 mg/kg IV infusion every three weeks with carboplatin and gemcitabine for six to 10 cycles, followed by 15 mg/kg every three weeks as a single agent</li> </ul> </td> </tr> <tr> <td data-bbox="487 1577 803 1650">Hepatocellular Carcinoma</td> <td data-bbox="803 1577 1529 1650"> <ul style="list-style-type: none"> <li>15 mg/kg IV infusion after administration of 1,200 mg of atezolizumab every three weeks</li> </ul> </td> </tr> </tbody> </table> <p><b>PLEASE NOTE:</b></p> <ul style="list-style-type: none"> <li>Not indicated for adjuvant treatment of colon cancer</li> <li>Withhold for at least 28 days prior to elective surgery. Do NOT administer Avastin for 28 days following major surgery and until adequate wound healing.</li> </ul>	Dosing	Dosing Regimen	Metastatic colorectal cancer	<ul style="list-style-type: none"> <li>5 mg/kg IV infusion every two weeks with bolus-IFL</li> <li>10 mg/kg IV infusion every two weeks with FOLFOX4</li> <li>5 mg/kg IV infusion every two weeks or 7.5 mg/kg every three weeks with fluoropyrimidine-irinotecan- or fluoropyrimidine-oxaliplatin-based chemotherapy after progression on a first-line bevacizumab product-containing regimen</li> </ul>	1st Line Non-Squamous NSCLC	<ul style="list-style-type: none"> <li>15 mg/kg IV infusion every three weeks with carboplatin and paclitaxel</li> </ul>	Recurrent Glioblastoma	<ul style="list-style-type: none"> <li>10 mg/kg IV infusion every two weeks</li> </ul>	Metastatic Renal Cell Carcinoma	<ul style="list-style-type: none"> <li>10 mg/kg IV infusion every two weeks with interferon alfa</li> </ul>	Persistent, recurrent or metastatic cervical cancer	<ul style="list-style-type: none"> <li>15 mg/kg IV infusion every three weeks with paclitaxel and cisplatin, or paclitaxel and topotecan</li> </ul>	Stage 3 or 4 epithelial ovarian, fallopian tube or primary peritoneal cancer following surgical resection	<ul style="list-style-type: none"> <li>15 mg/kg IV infusion every three weeks with carboplatin and paclitaxel for up to six cycles, followed by 15 mg/kg every three weeks as a single agent, for a total of up to 22 cycles</li> </ul>	Platinum-resistant recurrent epithelial ovarian, fallopian tube or primary peritoneal cancer	<ul style="list-style-type: none"> <li>10 mg/kg IV infusion every two weeks with paclitaxel, pegylated liposomal doxorubicin, or topotecan given every week</li> <li>15 mg/kg IV infusion every three weeks with topotecan given every three weeks</li> </ul>	Platinum-sensitive recurrent epithelial ovarian, fallopian tube, or primary peritoneal cancer	<ul style="list-style-type: none"> <li>15 mg/kg IV infusion every three weeks with carboplatin and paclitaxel for six to eight cycles, followed by 15 mg/kg every three weeks as a single agent</li> <li>15 mg/kg IV infusion every three weeks with carboplatin and gemcitabine for six to 10 cycles, followed by 15 mg/kg every three weeks as a single agent</li> </ul>	Hepatocellular Carcinoma	<ul style="list-style-type: none"> <li>15 mg/kg IV infusion after administration of 1,200 mg of atezolizumab every three weeks</li> </ul>
	Dosing	Dosing Regimen																			
	Metastatic colorectal cancer	<ul style="list-style-type: none"> <li>5 mg/kg IV infusion every two weeks with bolus-IFL</li> <li>10 mg/kg IV infusion every two weeks with FOLFOX4</li> <li>5 mg/kg IV infusion every two weeks or 7.5 mg/kg every three weeks with fluoropyrimidine-irinotecan- or fluoropyrimidine-oxaliplatin-based chemotherapy after progression on a first-line bevacizumab product-containing regimen</li> </ul>																			
	1st Line Non-Squamous NSCLC	<ul style="list-style-type: none"> <li>15 mg/kg IV infusion every three weeks with carboplatin and paclitaxel</li> </ul>																			
	Recurrent Glioblastoma	<ul style="list-style-type: none"> <li>10 mg/kg IV infusion every two weeks</li> </ul>																			
	Metastatic Renal Cell Carcinoma	<ul style="list-style-type: none"> <li>10 mg/kg IV infusion every two weeks with interferon alfa</li> </ul>																			
	Persistent, recurrent or metastatic cervical cancer	<ul style="list-style-type: none"> <li>15 mg/kg IV infusion every three weeks with paclitaxel and cisplatin, or paclitaxel and topotecan</li> </ul>																			
	Stage 3 or 4 epithelial ovarian, fallopian tube or primary peritoneal cancer following surgical resection	<ul style="list-style-type: none"> <li>15 mg/kg IV infusion every three weeks with carboplatin and paclitaxel for up to six cycles, followed by 15 mg/kg every three weeks as a single agent, for a total of up to 22 cycles</li> </ul>																			
	Platinum-resistant recurrent epithelial ovarian, fallopian tube or primary peritoneal cancer	<ul style="list-style-type: none"> <li>10 mg/kg IV infusion every two weeks with paclitaxel, pegylated liposomal doxorubicin, or topotecan given every week</li> <li>15 mg/kg IV infusion every three weeks with topotecan given every three weeks</li> </ul>																			
	Platinum-sensitive recurrent epithelial ovarian, fallopian tube, or primary peritoneal cancer	<ul style="list-style-type: none"> <li>15 mg/kg IV infusion every three weeks with carboplatin and paclitaxel for six to eight cycles, followed by 15 mg/kg every three weeks as a single agent</li> <li>15 mg/kg IV infusion every three weeks with carboplatin and gemcitabine for six to 10 cycles, followed by 15 mg/kg every three weeks as a single agent</li> </ul>																			
Hepatocellular Carcinoma	<ul style="list-style-type: none"> <li>15 mg/kg IV infusion after administration of 1,200 mg of atezolizumab every three weeks</li> </ul>																				

		<b>Infusion Time</b>		
	1 <sup>st</sup> infusion	90 min		
	2 <sup>nd</sup> infusion	60 min (if 1 <sup>st</sup> is tolerated)		
	Subsequent infusions	30 min (if 2 <sup>nd</sup> is tolerated)		
<b>Billing and Coding Information</b>		<b>10-digit NDC</b>	<b>11-digit NDC</b>	
	<b>Allymsys</b> (bevacizumab-maly)	100 mg: 70121-1754-1 400 mg: 70121-1755-1	100 mg: 70121-1754-01 400 mg: 70121-1755-01	
	<b>Jobevne</b> (bevacizumab-nwgd)	100 mg: 83257-009-11 400 mg: 83257-010-11	100 mg: 83257-0009-11 400 mg: 83257-0010-11	
	<b>Mvasi</b> (bevacizumab-awwb)	100 mg: 55513-206-21 400 mg: 55513-207-21	100 mg: 55513-0206-21 400 mg: 55513-0207-21	
	<b>Vegzelma</b> (bevacizumab-adcd)	100 mg: 72606-011-01 400 mg: 72606-012-01	100 mg: 72606-0011-01 400 mg: 72606-0012-01	
	<b>Zirabev</b> (bevacizumab-bvzr)	100 mg: 0069-0315-01 400 mg: 0069-0342-01	100 mg: 00069-0315-01 400 mg: 00069-0342-01	
		<b>HCPCS Code</b>	<b>Description</b>	
		Q5126	Injection, bevacizumab-maly, biosimilar ( <b>Allymsys</b> ), 10 mg	
		Q5160	Injection, bevacizumab-nwgd, biosimilar ( <b>Jobevne</b> ), 10 mg	
		Q5107	Injection, bevacizumab-awwb; biosimilar ( <b>Mvasi</b> ), 10 mg	
	Q5129	Injection, bevacizumab-adcd; biosimilar ( <b>Vegzelma</b> ), 10 mg		
	Q5118	Injection, bevacizumab-bvzr; biosimilar ( <b>Zirabev</b> ), 10 mg		
		<b>CPT Procedural Codes</b>	<b>Description</b>	
		96413	Chemotherapy IV infusion, up to one hour	
		96415	Chemotherapy IV infusion, additional hour*	
<b>Product Availability</b>	ALL available as Single-dose vials: <ul style="list-style-type: none"> <li>• 100 mg/4 mL</li> <li>• 400 mg/16 mL</li> </ul>			
<b>Contraindications</b>	None.			
<b>Recommended Medical Monitoring</b>	Bevacizumab has been associated with: <ul style="list-style-type: none"> <li>• Gastrointestinal perforations and fistula</li> <li>• Surgery and wound healing complications</li> <li>• Severe or fatal hemorrhage</li> <li>• Arterial Thromboembolic Events (ATE)</li> <li>• Venous Thromboembolic Events (VTE)</li> <li>• Hypertension</li> <li>• Posterior Reversible Encephalopathy Syndrome (PRES)</li> <li>• Renal Injury and Proteinuria</li> <li>• Infusion-Related Reactions</li> </ul>			

	<ul style="list-style-type: none"> <li>• Embryo-Fetal Toxicity</li> <li>• Ovarian Failure</li> <li>• Congestive Heart Failure</li> </ul> <p>Patients should be monitored for any of these reactions. Bevacizumab dose may be delayed, reduced or permanently discontinued based on the severity of adverse reactions.</p> <p>Bevacizumab can cause fetal harm when administered to a pregnant woman. Verify pregnancy status in females of reproductive potential prior to initiating Bevacizumab treatment. Female patients of reproductive potential should be advised to use effective contraception during treatment with Bevacizumab and for six months after the last dose.</p> <p>Long-term effects of Bevacizumab on fertility are unknown. Inform females of reproductive potential of the risk of ovarian failure prior to initiating Bevacizumab.</p>
<p><b>Approval Criteria</b></p>	<ul style="list-style-type: none"> <li>a. Physician administered IV infusion; in-office or HOPD             <ul style="list-style-type: none"> <li>i. Cannot be self-administered</li> </ul> </li> <li>b. Cervical Cancer (<b>must meet all</b>):             <ul style="list-style-type: none"> <li>i. Diagnosis of recurrent or metastatic cervical cancer - <b>OR</b> - persistent, recurrent, or metastatic small cell neuroendocrine carcinoma of the cervix</li> <li>ii. Prescribed by or in consultation with an oncologist</li> <li>iii. Patient age <math>\geq</math> 18 years</li> <li>iv. Request meets one of the following:                 <ul style="list-style-type: none"> <li>1. Dose does not exceed 15 mg/kg IV infusion Q3 weeks with paclitaxel and cisplatin, or paclitaxel and topotecan for disease that is not amenable to curative treatment with surgery or radiotherapy</li> <li>2. Dose is supported by practice guidelines or peer-reviewed literature for the relevant off-label use (prescriber must submit supporting evidence)</li> </ul> </li> </ul> </li> <li>c. Metastatic Colorectal Cancer (<b>must meet all</b>):             <ul style="list-style-type: none"> <li>i. Diagnosis of metastatic colorectal cancer</li> <li>ii. Prescribed by or in consultation with an oncologist</li> <li>iii. Patient age <math>\geq</math> 18 years</li> <li>iv. Request meets one of the following:                 <ul style="list-style-type: none"> <li>1. Dose does not exceed the following:                     <ul style="list-style-type: none"> <li>a. 5 mg/kg IV infusion Q2 weeks with bolus-IFL – <b>OR</b> –</li> <li>b. 10 mg/kg IV infusion Q2 weeks with FOLFOX4 – <b>OR</b> –</li> <li>c. 5 mg/ kg IV infusion Q2 weeks or 7.5 mg/kg every three weeks with fluoropyrimidine-irinotecan- or fluoropyrimidine-oxaliplatin-based chemotherapy after progression on a first-line bevacizumab product-containing regimen – <b>OR</b> –</li> <li>d. 5 mg/kg IV infusion Q2 weeks (in combination with FOLFIRI)</li> </ul> </li> <li>2. Dose is supported by practice guidelines or peer-reviewed literature for the relevant off-label use (prescriber must submit supporting evidence)</li> </ul> </li> </ul> </li> <li>d. First-Line Non-Squamous Non-Small Cell Lung Cancer (<b>must meet all</b>):             <ul style="list-style-type: none"> <li>i. Diagnosis of advanced, recurrent, or metastatic non-squamous Non-Small Cell Lung Cancer (NSCLC)</li> <li>ii. Used in combination with carboplatin and paclitaxel for first-line treatment</li> </ul> </li> </ul>

- iii. Using as first-line therapy - **OR** - Using as subsequent therapy if disease has progressed during or following treatment with a targeted agent for the expressed oncogene (e.g., kinase inhibitors that target EGFR, ALK, ROS1, BRAF, NTRK, RET, or MET mutations)
- iv. Prescribed by or in consultation with an oncologist
- v. Patient age  $\geq$  18 years
- vi. Request meets **one** of the following:
  1. Dose does not exceed 15 mg/kg IV infusion Q3 weeks
  2. Dose is supported by practice guidelines or peer-reviewed literature for the relevant off-label use (prescriber must submit supporting evidence)
- e. Recurrent Glioblastoma (**must meet all**):
  - i. Diagnosis of CNS-primary tumor
  - ii. Failed radiation therapy
  - iii. Prescribed by or in consultation with an oncologist
  - iv. Patient age  $\geq$  18 years
  - v. Bevacizumab used in a single line of therapy
  - vi. Tumor is WHO Grade III/IV glioma
  - vii. Request meets **one** of the following:
    1. Dose does not exceed 10 mg/kg IV infusion Q2 weeks
  - viii. Dose is supported by practice guidelines or peer-reviewed literature for the relevant off-label use (prescriber must submit supporting evidence)
- f. Metastatic Renal Cell Carcinoma (**must meet all**):
  - i. Diagnosis of metastatic clear cell Renal Cell Carcinoma
  - ii. Prescribed by or in consultation with an oncologist
  - iii. Patient age  $\geq$  18 years
  - iv. Bevacizumab used as first-line treatment in combination with interferon-alpha
  - v. Meets **one** of the following:
    1. Relapsed or medically unresectable stage IV disease – **AND** – bevacizumab used as single agent in those with non-clear cell histology
    2. Relapsed or medically unresectable stage IV disease – **AND** -- Bevacizumab is used in combination with erlotinib or everolimus in those with non-clear cell histology (including papillary RCC and hereditary leiomyomatosis and RCC [HLRCC])
  - vi. Request meets **one** of the following:
    1. Dose does not exceed 10 mg/kg IV infusion Q2 weeks
    2. Dose is supported by practice guidelines or peer-reviewed literature for the relevant off-label use (prescriber must submit supporting evidence)

	<p>g. Epithelial Ovarian, Fallopian Tube or Primary Peritoneal Cancer (must meet all)</p> <ul style="list-style-type: none"> <li>i. Diagnosis of epithelial ovarian, fallopian tube or primary peritoneal cancer</li> <li>ii. Prescribed by or in consultation with an oncologist</li> <li>iii. Patient age <math>\geq</math> 18 years</li> <li>iv. Request meets <b>one</b> of the following:           <ul style="list-style-type: none"> <li>1. Dose does not exceed:               <ul style="list-style-type: none"> <li>a. <b>For Stage III or IV disease following initial surgical resection:</b> 15 mg/kg IV infusion Q3 weeks in combination with carboplatin and paclitaxel; followed by 15 mg/kg Q3 weeks as single agent until disease progression or unacceptable toxicity</li> <li>b. <b>For Platinum-resistant recurrent disease:</b> 10 mg/kg IV infusion Q2 weeks – <b>OR</b> – 15 mg/kg Q3 weeks in combination with paclitaxel, liposomal doxorubicin or topotecan; continue until disease progression or unacceptable toxicity</li> <li>c. <b>For Platinum-sensitive recurrent disease:</b> 15 mg/kg IV infusion Q3 weeks (in combination with carboplatin and gemcitabine for six to 10 cycles or with carboplatin and paclitaxel for six to eight cycles), followed by bevacizumab 15 mg/kg Q3 weeks (as a single agent); continue until disease progression or unacceptable toxicity</li> </ul> </li> <li>2. Dose is supported by practice guidelines or peer-reviewed literature for the relevant off-label use (prescriber must submit supporting evidence)</li> </ul> </li> </ul> <p>h. Hepatocellular Carcinoma (<b>must meet all</b>):</p> <ul style="list-style-type: none"> <li>i. Diagnosis of hepatocellular carcinoma</li> <li>ii. Advanced, unresectable or metastatic disease</li> <li>iii. Prescribed by or in consultation with an oncologist</li> <li>iv. Patient age <math>\geq</math> 18 years</li> <li>v. Using for first-line treatment in combination with atezolizumab</li> <li>vi. Bevacizumab used until disease progression or unacceptable toxicity</li> <li>vii. Request meets <b>one</b> of the following:           <ul style="list-style-type: none"> <li>1. Dose does not exceed 15 mg/kg IV infusion Q3 weeks (in combination with atezolizumab on the same day) until disease progression or unacceptable toxicity               <ul style="list-style-type: none"> <li>a. May continue bevacizumab beyond disease progression if clinical benefit is demonstrated.</li> <li>b. If atezolizumab is discontinued due to unacceptable toxicity, may continue bevacizumab monotherapy.</li> </ul> </li> <li>2. Dose is supported by practice guidelines or peer-reviewed literature for the relevant off-label use (prescriber must submit supporting evidence)</li> </ul> </li> </ul>
<b>Age Restriction</b>	Adults $\geq$ 18 years old
<b>Coverage Duration</b>	<p><b>Initial:</b> six months. <b>Reauthorization:</b> 12 months.</p> <p>Dose will be approved according to the FDA approved labeling or within accepted standards of medical practice.</p>



<b>Other Criteria (LCD, NCD, etc.)</b>	Must follow LCD <a href="#">L37205</a> – Chemotherapy Drugs and their Adjuncts
<b>Misc Info, Appendix Etc.</b>	None.

STATUS	DATE REVISED	REVIEW DATE	APPROVED/REVIEWED BY	EFFECTIVE DATE
Created	1/22/26	1/22/26	Tamara Chinarian, PharmD, Clinical Pharmacist	N/A
Approved	N/A	2/12/26	Pharmacy & Therapeutics (P&T) Committee	2/12/26