

Criteria-Based Consultation Prescribing Program

CRITERIA FOR DRUG COVERAGE

Pantoprazole oral suspension packets (Protonix Suspension)

Notes:

- Quantity Limits: No
- ^Adequate trial is defined as 14-day treatment duration
- *Intolerance excludes adverse drug reactions that are expected, mild in nature, resolve with continued treatment, and do not require medication discontinuation
- **If patient has a feeding tube, trial of omeprazole oral disintegrating tablets (over-the-counter product) NOT required

Initiation (new start) criteria and criteria for *new members* entering Kaiser Permanente already taking the medication who have not been reviewed previously:

Non-formulary **pantoprazole oral suspension packets (Protonix Suspension)** will be covered on the prescription drug benefit when the following criteria are met:

- Patient is not currently swallowing any other medications in capsule/tablet form (only approved for patients unable to swallow solid dosage forms)
- Patient has failed an adequate trial[^] of lansoprazole 3 mg/mL oral suspension OR patient has an allergy or intolerance* to lansoprazole suspension
- Patient has failed an adequate trial[^] of omeprazole oral disintegrating tablets (over-the-counter product)** OR patient has an allergy or intolerance* to omeprazole oral disintegrating tablets
- Patient has failed an adequate trial[^] of lansoprazole oral disintegrating tablets (over-the-counter product) OR patient has an allergy or intolerance* to lansoprazole oral disintegrating tablets
- Patient has failed an adequate trial of esomeprazole suspension packets (criteria based) OR patient has an allergy or intolerance* to esomeprazole suspension packets