

Criteria-Based Consultation Prescribing Program

CRITERIA FOR DRUG COVERAGE

Sodium sulfate, potassium sulfate, and magnesium sulfate solution (SUPREP Bowel Prep Kit)

Notes:

- Quantity Limits: No
- ^ Adequate trial is defined as: Patient completed the bowel prep as instructed however prep quality was unsatisfactory per clinician performing the endoscopy
- * Intolerance excludes adverse drug reactions that are expected, mild in nature, resolve with continued treatment, and do not require medication discontinuation

Initiation (new start) criteria: Non-formulary **sodium sulfate, potassium sulfate, and magnesium sulfate solution (SUPREP Bowel Prep Kit)** will be covered on the prescription drug benefit for 6 months when the following criteria are met:

- Prescriber is a Gastroenterology Department clinician **AND**
- Patient has a document polyethylene glycol allergy **OR**
- Patient has failed an adequate trial^ of, or patient has an allergy or intolerance* to the following:
 - Polyethylene glycol 3350, sodium sulfate, sodium bicarbonate, sodium chloride, potassium chloride oral reconstituted solution (GaviLyte)
 - Polyethylene glycol 3350, sodium sulfate, sodium chloride, potassium chloride, sodium ascorbate, and ascorbic acid for oral solution (MoviPrep)