MEMO

Date: September 20, 2021 - UPDATED

To: All Medical Staff

From: Dr. Perry Gray
Provincial Lead, Medical Specialist Services
Chief Medical Officer, Shared Health

Re: Use of Tocilizumab for COVID-19 Indication—NEW UPDATE—
Locations of Administration and Dose Clarification

Use of Tocilizumab for COVID-19 indication is now approved in Intensive Care Units (ICU) at HSC, St. Boniface, Grace, and Brandon; in Specialty Care Units (SCU); and, on medical wards/Emergency Departments (ED) in sites with an ICU/SCU. An ICU attending physician shall be consulted for agreement of Tocilizumab administration in all cases, specifically as follows:

**SCU and medical wards/EDs in sites with SCU**
Physicians providing care to patients in SCU and medical wards/EDs in sites with an SCU outside of Winnipeg/Brandon shall call HSC Paging at 204-787-2071 and ask for the Provincial ICU/Critical Care Physician on-call to discuss the case.
- Tocilizumab administration outside Winnipeg/Brandon should not delay patient transfer and therefore should not be administered if the intent is to imminently transfer the patient to Winnipeg or Brandon ICU.

**Medical wards/EDs in sites with ICU**
Physicians providing care to patients on medical wards/EDs in sites with an ICU (HSC, St Boniface, Grace, Brandon) shall consult their site ICU Attending physician on call.

**Medical wards/EDs in sites without SCU or ICU**
Tocilizumab is not available at these sites at this time. Patient referral can be discussed with higher acuity sites or Provincial ICU/Critical Care physician on-call (HSC Paging at 204-787-2071) on an as needed basis.

**EXCEPTION:** Sites where Provincial approval has been granted (currently only Swan River and Selkirk) must contact the Provincial ICU/Critical Care Physician on-call to discuss the case.

All orders for Tocilizumab will be dose banded at 400 mg and administration of a single dose will be provided ONLY in the following clinical circumstances:

- Recently hospitalized patients (i.e., within first 3 days of admission) who have been admitted to the intensive care unit (ICU) within the prior 24 hours and who require invasive mechanical ventilation, noninvasive ventilation, or high-flow nasal cannula (HFNC) oxygen; or

- Recently hospitalized patients (i.e., within first 3 days of admission) not admitted to the ICU who have rapidly increasing oxygen needs and require noninvasive ventilation or HFNC oxygen and who have significantly increased markers of inflammation (CRP ≥75 mg/L).
IMPORTANT NOTES:

1) Pregnancy
Pregnant patients will be assessed on a case-by-case basis. If the ICU attending determines the pregnant patient (any gestational age) meets clinical criteria for Tocilizumab, then the ICU attending will consult with the Obstetrics attending on-call who will determine if the benefit to the patient outweighs the risk to the baby. The mother’s ability to participate in the discussion about risk to baby versus benefit to mother shall also be addressed as part of the consultation.

Orders for Tocilizumab should be written by an ICU Attending Physician or, if delegated (in ICU or outside of the ICU), the order should be written as: “discussed with _______” (the name of the ICU Attending Physician).

2) Pediatrics
A small supply of Tocilizumab shall be maintained for pediatric patients for the indication of Multisystem Inflammatory Syndrome in Children (MIS-C).

3) Hospital Acquired COVID-19
Patients that acquire COVID-19 in hospital may be considered for Tocilizumab administration within 10 days of the positive test result if the listed criteria have been met.

4) Supply
Provincial supply and allocations of Tocilizumab is being monitored closely and may result in changes to criteria to ensure access. Updates will be provided when such changes are required.