

Checklist to Determine Eligibility of Patients Prior to Initiation of Home Infusion

Requirements for home administration

- The decision to administer VPRIV® (velaglucerase alfa for infusion) in the home setting is that of the treating physician, in consultation with the patient and/or caregiver
- The following information identifies clinical and logistical questions that should be considered prior and subsequent to homecare transition¹
- The treating physician is ultimately responsible for regular monitoring of the patient receiving home infusion of VPRIV®
- The treatment administered (dose and infusion rate) in the hospital/clinic setting should not be altered in the home setting unless medically warranted due to safety considerations
- The infusion should only be performed by or under the supervision of the treating physician or the homecare nurse

Assessment by the treating physician

This checklist is intended for use in conjunction with the VPRIV® SmPC. This resource was developed by Shire as part of a commitment made in the Risk Minimisation Measures for VPRIV®.

Necessary actions in the event of a serious infusion reaction:

	Yes	No
Has the patient had at least three consecutive well tolerated VPRIV® infusions (no infusion-related reactions) in the clinic?	<input type="checkbox"/>	<input type="checkbox"/>
Is the patient considered medically stable?	<input type="checkbox"/>	<input type="checkbox"/>
Does the patient have a history of adherence to the infusion schedule?	<input type="checkbox"/>	<input type="checkbox"/>
Has the patient agreed to receive VPRIV® at home?	<input type="checkbox"/>	<input type="checkbox"/>
Has the patient and/or caregiver been given adequate information about home infusion, the associated risks, the possible complications and the provision of medical assistance at home including emergency contact details?	<input type="checkbox"/>	<input type="checkbox"/>
Is the patient and/or caregiver adequately trained and aware of the risks of home infusion?	<input type="checkbox"/>	<input type="checkbox"/>
Is the home situation safe and adequate? (Clean, hygienic, storage area for supplies, drug and emergency medication)	<input type="checkbox"/>	<input type="checkbox"/>
Is rapid and reliable communication possible if problems occur?	<input type="checkbox"/>	<input type="checkbox"/>
Are medications available to enable the patient and/or caregiver to respond to an emergency situation if necessary?	<input type="checkbox"/>	<input type="checkbox"/>
All of the above conditions met?	<input type="checkbox"/>	<input type="checkbox"/>

Reference

1. Haute Autorité de Santé. Gaucher disease National Diagnosis and Treatment Protocol 2007; available at: http://www.has-sante.fr/portail/upload/docs/application/pdf/ven_gaucher_web.pdf. Accessed 09 May 2016