

BC RENAL FORMULARY FOR PATIENTS WITH GLOMERULONEPHRITIS

(Revised as of June 2020)

The first of its kind glomerulonephritis formulary, funds immunosuppressant medications for patients registered with the BC Renal when an application is completed and approved. All formulary medications are oral products and only generic formulations will be funded unless otherwise indicated with the corresponding brand name. The use of these drugs will be monitored closely and the funding policy will be re-evaluated periodically.

Please note that at this time, all glomerulonephritis formulary medications except rituximab will be distributed on behalf of the BC Renal by Macdonald's Prescriptions (**fax 1-866-685-0305**) and only nephrologists treating glomerulonephritis are eligible to apply for formulary coverage.

FORMULARY MEDICATIONS

Azathioprine
Cyclophosphamide
Cyclosporine
Mycophenolate Mofetil
Mycophenolate Sodium (Myfortic®) *
Prednisone
Rituximab (Rituxan®) ** ❖❖
Tacrolimus

For PEDIATRIC patients: All formulary medications are available to BC Renal-registered pediatric patients. Any compounded formulations of formulary medication or commercially available liquid forms of medication will also be funded for pediatric patients.

❖❖ injectable medication

* Additional information required, see application form.

** Approved on a case-by-case basis. Only hospitals may invoice the BC Renal and to a cost up to the PHSA Supply Chain price.