Zyvox (linezolid) Authorization criteria

1. Does the member have a funded condition appropriately treated with linezolid?

- Vancomycin resistant Enterococcus faecium infection (including concurrent bacteremia)
- Nosocomial pneumonia caused by Staphylococcus aureus or multi- drug resistant Streptococcus pneumoniae
- Community Acquired pneumonia caused by Staphylococcus aureus (reserved for MRSA) or multi- drug resistant Streptococcus pneumoniae
- Complicated skin and skin structure infections, including diabetic foot infections caused by MRSA, Streptococcus pyogenes or Streptococcus agalactiae.
- Uncomplicated skin and skin structure infections – Reserved as an alternative treatment for MRSA

Note- Osteomyelitis and prosthetic joint infections are off label uses- should be only used for VRE

   a. Yes- Continue to question 2
   b. No- Deny Cat 3 – Not an FDA approved use of medication

2. Does the member meet the following conditions? *Must be documented*
   - Vancomycin resistant Enterococcus faecium (VRE) infection
   - MRSA infection AND at least one of the following
     - Therapeutic trial of Vancomycin
     - Severe intolerance to vancomycin (Red Man syndrome)
     - MRSA isolates determined to have MIC more than 2 mcg/ml
     - Severe renal insufficiency documented with serum creatinine

   a. Yes, Continue to question 3
   b. No, Deny Cat 5- *Zyvox is indicated only for the treatment of vancomycin resistant bacterial infections, WVCH is committed to reduce the risk of further drug resistance by encouraging appropriate use and we require documentation to support intended use is for susceptible organisms.*

3. Is member taking any medication that is contraindicated for use with linezolid (inhibits monoamine oxidase)
   - Buproprion
   - Buspirone
   - MAOI
   - Meperidine
   - SNRI (venlafaxine, duloxetine)
   - SSRI (fluoxetine, paroxetine, citalopram, sertraline, escitalopram)
   - Sympathomimetic agents (pseudoephedrine, phenylephrine)
   - Tricyclic antidepressants
   - Serotoinin 5-HT1D antagonists- sumatriptan, rizatriptan, zolmitriptan

   a. No- Approve – not usually used for longer than 2 weeks due to risk of toxicity
   b. Yes- Forward to Medical Director for evaluation of medical appropriateness

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