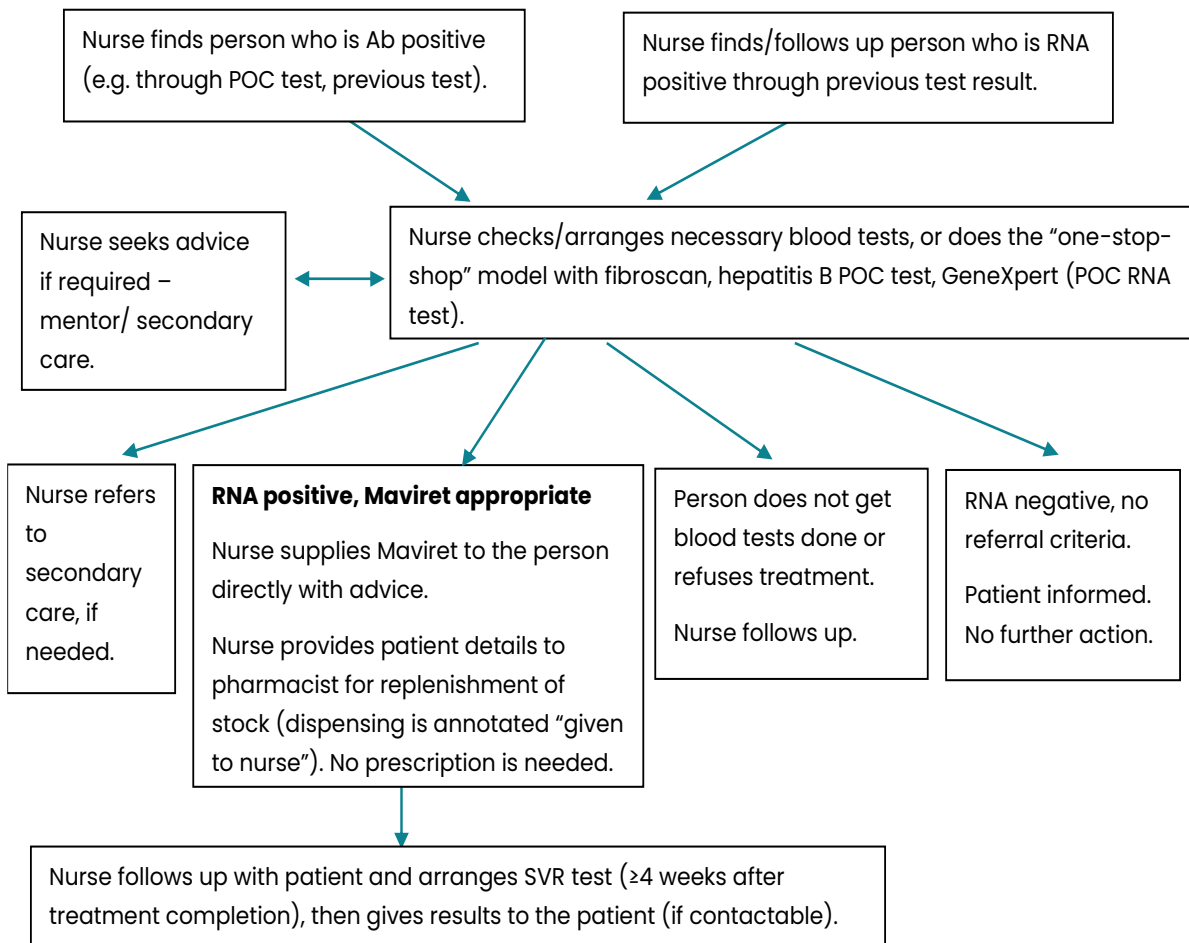


Hepatitis C Treatment Without Prescription

Model of Care | Nurse direct supply, outreach



SVR = Sustained Virologic Response (test for cure)

POC = Point of Care test

Ab = antibody

Please refer to the notes on Page 2.

Notes

1. The nurse must meet the requirements of the Nursing Council with their authorisation recorded in the Nursing Council website public register and be approved for direct supply by the Regional/National Hepatitis C Programme Lead and Clinical Lead.
2. Initial stock comes from an [Abbvie Care pharmacy](#) arranged by a Hepatitis C Programme Lead. Replenishment stock requires a patient name and advance notice to the pharmacy by **both** the nurse **and** a Hepatitis C Programme Lead with information about direct supply and the nurse's approval.
<https://www.maviret.co.nz/find-a-pharmacy/>
3. Standard Operating Procedures for Nurse Direct Supply for Maviret must be used by nurses.
4. The nurse documents action taken including the pharmacy used for Maviret dispensing.
5. The nurse informs the GP (with patient consent, if they have a GP) of testing, results, referral, treatment, or loss to follow-up/treatment refusal and SVR results.
6. Nurse supply is for remote/outreach situations e.g. mobile van, or where the nurse considers the patient is unlikely to get the treatment from a pharmacy.
7. The nurse gives one pack and repeat or both packs of Maviret at their discretion and records supply.
8. The pharmacist keeps documentation including the nurse's name. The pharmacist does not check appropriateness of supply given the nurse's experience and that Maviret is already with the patient. Dispensing record has patient name, nurse's name and "given to nurse". Use sundry label on pack, state "given to nurse", nurse's name, date, dispensing no, pharmacy name, but **not** patient name.
9. Other than hepatitis C, the nurse identifies any blood tests anomaly/ies and refers them to the patient's GP or a relevant health service if required, with patient consent.