

Nursing/Pharmacy

896

**FIGHTING THE WAR AGAINST COVID-19:
ADMINISTRATION OF BAMLANIVIMAB (BAM) OR
BAMLANIVIMAB + ETESIVIMAB (BAM + E); A
COOPERATIVE EFFORT BETWEEN A COMMUNITY
CANCER CENTER AND AN URGENT CARE (UC) FACILITY**

¹Patrick Skeffington, ²Robert Aisenberg, ¹Janice Dallacosta*, ¹Ian Donaghy, ²Dani Hackner, ²Kelly Houde, ¹Kathy Moraes, ¹Annemarie Santos. ¹Southcoast Centers for Cancer Care, Fairhaven, MA, USA; ²Southcoast Health, Fall River, MA, USA

Background Goal of the Massachusetts DPH is to ensure equitable distribution of BAM to the most vulnerable at risk of poor outcomes from COVID-19 and to communities with the highest incidences of COVID-19. Hospitals should allocate available doses in a manner consistent with this guidance: 1. Patients who meet the EUA criteria; a lottery system will be used if supply is exceeded 2. Patients with comorbidities (high risk) tend to have worse outcomes when infected with SARS-CoV-2 3. BAM was approved under an EUA for the treatment of mild to moderate COVID-19 for those at high risk of progressing to severe disease (revoked 4/16/21). 4. BAM + E combo was approved under an EUA for the same patients and criteria, Southcoast Health entered into this relationship with DPH to provide this service to the southeastern MA population.

Methods Patients identified based on algorithm using Social Vulnerability Index (SVI) and EUA criteria RNs screened cases for positive criteria using lottery priority and SVI Pulmonologists consented appropriate patients, ordered infusions, routed cases for final scheduling within window of treatment Experienced nursing staff from various Southcoast departments treated up to 6 patients per day Oncology pharmacies are uniquely experienced to prepare monoclonal antibodies (MABS) such as BAM and BAM + E Due to proximity of the Oncology pharmacy to the UC Center, pharmacy reviewed, prepared and delivered infusions to UC once patient was assessed by RNs

Results First 152 cases: 7.2% inpatient admissions within 14 days 13.8% ED/UC visits within 14 days 2% inpatient admissions in 28 days 5.9% ED/UC visits within 28 days Two deaths during initial 152 cases.

Conclusions Cooperative effort between the Cancer Center and Urgent Care led to positive outcomes for local COVID-19 patients. Southcoast demonstrated a 6% hospital admission rate for COVID-19 patients in the MAB program versus 26% admission rate overall for COVID-19 patients.

Acknowledgements Thanks to our colleagues at the University of Rhode Island College of Pharmacy for their support with the poster

<http://dx.doi.org/10.1136/jitc-2021-SITC2021.896>