

9. **Dosage allowed/Quantity limit:** Administer 1mcg/kg subcutaneously once weekly, then adjust the weekly dose by increments of 1 mcg/kg until the patient achieves a platelet count 50 x 10<sup>9</sup>/L. Max dose 10 mcg/kg.

*Note:* Discontinue if platelet count does not increase to a level sufficient to avoid clinically important bleeding after 4 weeks at the max dose.

If all the above requirements are met, the medication will be approved for 3 months.

## For **reauthorization**:

1. Chart notes improvement in platelet count from baseline to a level sufficient to avoid clinically



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- 9. Grainger J, Bussel J, Tarantino M, et al. A single-arm, long-term efficacy and safety study of subcutaneous romiplostim in children with immune thrombocytopenia. *Blood Adv.* 2023;7(3):396-405. doi:10.1182/bloodadvances.2021006014
- 10. Grainger JD, Kühne T, Hippenmeyer J, Cooper N. Romiplostim in children with newly diagnosed or persistent primary immune thrombocytopenia. *Ann Hematol.* 2021;100(9):2143-2154. doi:10.1007/s00277-021-04590-0
- 11. Kuter DJ, Newland A, Chong BH, et al. Romiplostim in adult patients with newly diagnosed or persistent immune thrombocytopenia (ITP) for up to 1 year and in those with chronic ITP for more than 1 year: a subgroup analysis of integrated data from completed romiplostim studies. *Br J Haematol*. 2019;185(3):503-513. doi:10.1111/bjh.15803
- 12. Wojciechowski P, Wilson K, Nazir J, et al. Efficacy and Safety of Avatrombopag in Patients with Chronic Immune Thrombocytopenia: A Systematic Literature Review and Network Meta-Analysis. *Adv Ther.* 2021;38(6):3113-3128. doi:10.1007/s12325-021-01752-4

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