



For OIC in advanced illness or cancer: see table below.

Weight (kg)	Dose
Less than 38 kg	0.15 mg/kg subcutaneously every other day as needed
38 to 61 kg	8 mg subcutaneously every other day as needed
62 to 114 kg	12 mg subcutaneously every other day as needed
Greater than 114 kg	0.15 mg/kg subcutaneously every other day as needed

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

For **reauthorization**:

1. Member continues to require opioid therapy; AND
2. Chart notes show the member has improvement of signs and symptoms of constipation (e.g. Increase number of spontaneous bowel movements, decreased episodes of straining, reduced duration of time to bowel movement).

If all the above requirements are met, the medication will be approved for an additional 6 months.

CareSource considers Relistor (methylnaltrexone) not medically necessary for the treatment of conditions that are not listed in this document.

