

Medical Policy

Healthcare Services Department

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| <p>Policy Name</p> Metoclopramide IV Administration at home: | <p>Policy Number</p> MP-ME-FP-05-24 | <p>Scope</p> <input type="checkbox"/> MMM MA <input type="checkbox"/> MMM Multihealth | | | | | | | | |
| <p>Service Category</p> <table><tr><td><input type="checkbox"/> Anesthesia</td><td><input checked="" type="checkbox"/> Medicine Services and Procedures</td></tr><tr><td><input type="checkbox"/> Surgery</td><td><input type="checkbox"/> Evaluation and Management Services</td></tr><tr><td><input type="checkbox"/> Radiology Procedures</td><td><input type="checkbox"/> DME/Prosthetics or Supplies</td></tr><tr><td><input type="checkbox"/> Pathology and Laboratory Procedures</td><td><input type="checkbox"/> Other _____</td></tr></table> | | | <input type="checkbox"/> Anesthesia | <input checked="" type="checkbox"/> Medicine Services and Procedures | <input type="checkbox"/> Surgery | <input type="checkbox"/> Evaluation and Management Services | <input type="checkbox"/> Radiology Procedures | <input type="checkbox"/> DME/Prosthetics or Supplies | <input type="checkbox"/> Pathology and Laboratory Procedures | <input type="checkbox"/> Other _____ |
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| <p>Service Description</p> <p>Metoclopramide IV Administration at Home:</p> <p>Metoclopramide (Reglan) is a medication used to treat nausea, vomiting, and gastroparesis (delayed stomach emptying). When administered intravenously (IV), it is typically done in a clinical setting, but in certain cases, it may be administered at home under the guidance of a healthcare provider. IV administration at home involves the patient receiving the medication via a sterile infusion process under the supervision of a home health nurse or other qualified healthcare professional.</p> | | | | | | | | | | |

Medical Necessity Guidelines

1. Indications for Use:

- Persistent nausea and vomiting unresponsive to oral medications.
- Treatment of gastroparesis when oral forms of the medication are ineffective or not tolerated.
- Prevention of nausea and vomiting associated with chemotherapy.
- Management of postoperative nausea when oral medications are not feasible.

2. Patient Criteria:

- Must have a documented condition (e.g., gastroparesis, chemotherapy-induced nausea) that warrants metoclopramide use.
- Patient is unable to tolerate oral medications or requires a higher degree of symptom control that is better achieved with IV administration.
- The patient has been evaluated by a physician, and home IV administration has been deemed safe and appropriate.
- Patient or caregiver can manage the infusion process with training, or a home healthcare provider will administer the medication.

3. Clinical Oversight:

- Regular monitoring by a healthcare provider, including periodic visits to assess treatment efficacy and any potential side effects.
- Ongoing communication with the prescribing physician for dosage adjustments or discontinuation of therapy.

4. Safety Considerations:

- Risk of adverse effects (such as tardive dyskinesia, an irreversible movement disorder, or neuroleptic malignant syndrome) should be clearly explained to the patient.
- Patient must be monitored for side effects, especially in long-term use.
- Proper management of IV access, such as a peripheral or central line, to reduce the risk of infection or complications.

FDA approved IV dose for home service:

The FDA-approved IV dose of metoclopramide for home administration follows general guidelines that align with its labelled use, though home administration itself is typically decided on a case-by-case basis under the supervision of a healthcare provider. The dose depends on the condition being treated.

Common FDA-approved IV dosing regimens for metoclopramide:**1. Gastroparesis (Diabetic):**

- Initial dose: 10 mg IV over 1-2 minutes, administered 30 minutes before meals and at bedtime.
- Maximum duration: Treatment should generally not exceed 12 weeks due to the risk of tardive dyskinesia.

2. Nausea and Vomiting (Chemotherapy-induced):

- Prophylactic dose: 1-2 mg/kg IV, 30 minutes before chemotherapy. May be repeated every 2-4 hours as needed.
- Maximum single dose: 10 mg.

3. Postoperative Nausea and Vomiting:

- Dose: 10 mg IV over 1-2 minutes, which may be repeated if necessary, after a few hours.

Considerations for Home Use:

Medical necessity for IV administration must be clearly documented, as oral formulations are typically preferred unless the patient cannot tolerate them or IV is clinically required. Metoclopramide IV is generally prescribed for short-term use due to the risk of long-term side effects. Typically, treatment duration should not exceed 12 weeks without re-evaluation.

Limits or Restrictions

Restrictions and Contraindications:

- Caution should be used in elderly patients and those with pre-existing conditions such as Parkinson's disease, seizure disorders, or renal impairment.
- Contraindicated in patients with pheochromocytoma, gastrointestinal hemorrhage, or a history of tardive dyskinesia.
- Dose and frequency may be adjusted based on the patient's condition, but the risks of prolonged use, particularly the development of tardive dyskinesia, limit the duration of therapy.
- The standard dosing for metoclopramide IV is generally 10 mg administered over 1-2 minutes every 6-8 hours. Maximum dose limits should be followed as excessive dosing increases the risk of adverse effects. The total daily dose of metoclopramide should not exceed 40 mg, and treatment should not exceed 12 weeks.

Reference Information

The information provided aligns with guidelines and recommendations from several reputable sources, including the American Gastroenterological Association (AGA) and FDA-approved labelling for metoclopramide. Here is a breakdown of references used for the information:

1. FDA Label for Metoclopramide

- FDA-approved prescribing label: FDA Reglan Prescribing Information:
https://www.accessdata.fda.gov/drugsatfda_docs/label/2017/017854s062lbl.pdf

2. American Gastroenterological Association (AGA) Clinical Guidelines

- Source: Parkman, H. P., et al. "Clinical guideline: Management of gastroparesis." Journal: Gastroenterology' Year: 2004., Volume and Issue: Vol. 127, Issue 5, Pages: 1589-1591. Management strategies for gastroparesis, with metoclopramide recommended as the first-line therapy.

2. American Society of Clinical Oncology (ASCO) Guidelines

- Source: Hesketh, P. J., et al. "Antiemetics: American Society of Clinical Oncology clinical practice guideline update." Journal: Journal of Clinical Oncology ,Year: 2020,Volume and Issue: Vol. 38, Issue 24,Pages: 2782-2797. Details: Includes indications for metoclopramide in chemotherapy-induced nausea and vomiting.
- Goodman & Gilman's The Pharmacological Basis of Therapeutic, Brunton, L. L., et al, Year: 13th Edition, 2017. Chapter/Page: Chapter on prokinetic and antiemetic drugs, pp. 1309-1311. Details: Includes mechanism, therapeutic uses, and dosage guidelines for metoclopramide.

Policy History

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| Revision Type | Summary of Changes | P&T Approval Date | MPCC Approval Date |
|-----------------|---|-------------------|--------------------|
| INTERNAL POLICY | Metoclopramide (Reglan) is a medication used to treat nausea, vomiting, and gastroparesis (delayed stomach emptying). When administered intravenously (IV), it is typically done in a clinical setting, but in certain cases, it may be administered at home under the guidance of a healthcare provider. | | 12/20/2024 |