

Tolvaptan Discontinuation Form

* Please fax completed form to MacDonald's Prescriptions Renal Pharmacy at 1-855-569-0660 Patient , PHN, Tolvaptan Patient ID **Report Generated On** 23-Jul-2024 Our records indicate that this patient has stopped Tolvaptan therapy. For ongoing monitoring purposes, please select the reason below for this treatment discontinuation. If this discontinuation was not intended and you expect the patient to still be on treatment, please contact Macdonald's Prescriptions Renal Pharmacy. For Physicians What is the reason for discontinuing? Check all that apply Intolerable aquaretic symptoms Patient approaching ESKD Process issue e.g. bloodwork delayed Patient preference Abnormal liver enzymes (see recommended testing note) Other blood work abnormality, please specify _____ Other, please specify ____ Will you be planning to trial the drug again or is the discontinuation permanent? Planning to use again in the future Permanent discontinuation Note: Recommended testing for abnormal liver enzymes If liver enzyme testing is abnormal while taking tolvaptan, the drug should be immediately held and testing repeated in 48-72 hours Recommended guidelines for permanent discontinuation include: ALT or AST >8-times ULN with any one measurement ALT or AST >5-times ULN, for more than 2 weeks ALT or AST >3-times ULN, AND any measurement of total bilirubin > 2 x ULN or INR > 1.5 ALT or AST >3-times ULN, with abnormalities that persist despite cessation of treatment If AST or ALT remains <3-times ULN with stabilization or improvement after holding tolvaptan, and/or if there is an alternate suspected explanation, this is a situation where re-challenging may be considered. This should be decided with careful consideration of risks and benefit on an individual patient basis. If you choose to re-challenge, liver enzymes should be monitored frequently (eg, weekly for the first month). Whether cessation is permanent or temporary, all patients with evidence of possible drug-induced liver injury should be monitored closely until the abnormalities return to the normal or to a baseline state. Physician signature ___ Date

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