DIVISION OF PUBLIC AND BEHAVIORAL HEALTH SCOPE: STATEWIDE

SUBJECT: Window of Administration for Long NUMBER:

Acting Injectable Antipsychotics

EFFECTIVE DATE: Start (mo./year) NEXT REVIEW DATE: Two years

from start

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APPROVED BY: Statewide Psychiatric Medical Director

SUPERSEDES: New

I. PROTOCOL: DPBH provides Long Acting Injectable Antipsychotics (LAIs) for patients, whom on occasion may not present for their injectable on the specified administration date.

II. PURPOSE: To provide guidelines on the window of administration of LAIs.

III. DEFINITIONS:

A. Long Acting Injectable Antipsychotic: An antipsychotic which is administered in parenteral form for sustained drug release over an extended period of time.

IV. PROCEDURE:

- A. The following LAIs may be administered using the following parameters without requiring clarification from Medical Staff.
 - 1. Invega Sustenna (Paliperidone Palmitate monthly LAI) may be administered not earlier than week 3 and not later than week 5 after the last injection.
 - 2. Invega Trinza (Paliperidone Palmitate 3-month LAI) may be administered not earlier than week 10 and not later than week 14 after the last injection.
 - 3. Risperdal Consta (Risperidone 2-week LAI) may be administered not earlier than week 2 and not later than week 3 after the last injection.
 - 4. Perseris (Risperidone monthly LAI) may be administered not earlier than week 4 and not later than week 6 after the last injection.
 - 5. Abilify Maintena (Aripiprazole Monohydrate monthly LAI):

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a. Abilify Maintena doses should be administered not earlier than 26 days after the last injection.

- b. If the second or third doses are missed, Abilify Maintena should be administered not later than 5 weeks after the last injection.
- c. If the fourth or subsequent doses are missed, Abilify Maintena should be administered not later than 6 weeks after the last injection.
- 6. Aristada (Aripiprazole Lauroxil monthly, every 6 week, or 2-month LAI):
 - a. In the event of early dosing, an Aristada injection should not be given earlier than 14 days after the previous injection.
 - b. In the event of missed dose, an Aristada injection should be administered not later than the following:
 - (a) Monthly 441 mg not later than 6 weeks after the last injection;
 - (b) Monthly 662mg or 882 mg not later than 8 weeks after the last injection;
 - (c) 882 mg every 6 weeks, not later than 8 weeks after the last injection;
 - (d) 1064 mg every 2 months, not later than 10 weeks after the last injection.
- 7. Haldol Decanoate (Haloperidol monthly LAI)
 - a. If the second or third doses are missed, Haldol Decanoate should be administered not later than 5 weeks after the last injection.
 - b. If the fourth or subsequent doses are missed, Haldol Decanoate should be administered not later than 8 weeks after the last injection.
- 8. Prolixin Decanoate (Fluphenazine 2-4 week LAI)
 - a. For those patients who are scheduled to receive Prolixin Decanoate injections every 4 weeks and who have received at least two previous injections as scheduled, the next dose should be administered not later than 8 weeks after the last injection.
 - b. For those patients who are scheduled to receive Prolixin Decanoate injections every 2 or 3 weeks, medical staff should be consulted for any missed doses.

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B. Patients who have missed doses of their LAI and present outside the window of administration as described in this policy will require consultation with Medical Staff. Please refer to the References section for additional resources

V. REFERENCES:

- A. Lexicomp http://online.lexi.com/lco/action/home?siteid=2
- B. PDR https://pdr.net/
- C. SMI Adviser: https://smiadviser.org/knowledge_post/what-should-i-do-if-a-patient-misses-a-scheduled-dose-of-paliperidone-palmitate-invega-sustenna-injections-what-if-there-is-a-gap-in-long-acting-injectable-treatment
- D. The American Psychiatric Association practice guideline for the treatment of patients with schizophrenia. 3rd edition. https://psychiatryonline.org/doi/pdf/10.1176/appi.books.9780890424841

VI. ATTACHMENTS: N/A