

Appendix 1: Drugs covered by this service specification

Drug	Clinical area	Level of service and routine monitoring requirement*	
Azathioprine and 6-mercaptopurine	Gastroenterology Rheumatology Dermatology	May be claimed at level 1 or 2	
		FBC, LFTs, creatinine and U&Es	Every three months
		ESR and CRP	Every six months
Ciclosporin	Dermatology Rheumatology	May be claimed at level 1 or 2 Treatment duration must not exceed 12 months in dermatology.	
		FBC, LFTs, creatinine and U&Es	Every three months
		Blood lipids	Every six months
		ESR and CRP	Every six months
Denosumab	Rheumatology	May be claimed at level 1 or 2	
		Plasma calcium concentration	One to three weeks before each denosumab injection. May be more frequent in patients with severe renal impairment (specialist to advise)
		Creatinine clearance	One to three weeks before each denosumab injection
Dronedarone Products of low clinical effectiveness, where there is a lack of robust evidence of clinical effectiveness or there are significant safety concerns.	Cardiology	May be claimed at level 1 or 2	
		LFTs	Monthly for 6 months and then every three months for 6 months and periodically thereafter
Leflunomide	Rheumatology	May be claimed at level 1 or 2	
		FBC, LFTs, creatinine and U&Es	Every three months
		ESR and CRP	Every six months

Methotrexate	Gastroenterology Rheumatology Dermatology	May be claimed at level 1 or 2	
		FBC, LFTs, creatinine and U&Es	Every three months
		ESR and CRP	Every six months
Mycophenolate mofetil	Rheumatology Dermatology	May be claimed at level 1 or 2	
		FBC, LFTs, creatinine and U&Es	Every three months
		ESR and CRP	Every six months
Riluzole	Neurology	May be claimed at level 1 or 2	
		FBC	Monthly for the first three months, then every 3 months for nine months and annually thereafter.
Sulfasalazine	Rheumatology	May be claimed at level 1 or 2 Monitoring only required during the first 12 months of treatment.	
		FBC, LFTs, creatinine and U&Es	Every three months
Tacrolimus and sirolimus	Renal transplant (existing patients only)	For existing patients only and to be repatriated to secondary care over time.	

*More frequent monitoring may be required in some clinical circumstances, this will be advised by the hospital.