

<b>POLICY NAME</b>	Gattex (teduglutide)	<b>POLICY #</b>	<b>2297P</b>
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## Criteria

### Coverage Criteria

- ☐ 1.1 Ordered by a Gastroenterologist (stomach doctor)
- ☐ 1.2 Age 1 year and older
- ☐ 1.3 Diagnosis of short bowel syndrome
- ☐ 1.4 Documentation that the patient has been receiving parenteral nutrition for at least the past 12 months
- ☐ 1.5 Review of chart notes and labs documenting diagnosis and confirming that patient has met all of the above requirements for treatment with Gattex by both a pharmacist and medical director

### Exclusion Criteria – Any of the following prevents coverage

- ☐ 2.1 Gattex will not be covered in patients with a diagnosis of high ostomy output without a diagnosis of short bowel syndrome