See individual Prescribing Information Sheets for more information.

NHS

Nottinghamshire Area Prescribing Committee

Summary of Monitoring Requirements for Medicines used in Nottinghamshire APC Rheumatology Shared Care Protocols

Medicine (Click on drug name to see prescribing information sheet)	Time period in Treatment	Frequency of Monitoring	FBC	LFT	U&E	BP	Weight	HbA1c	CRP/ ESR	Other
Methotrexate OR Azathioprine	0-6 weeks	Fortnightly	✓	✓	✓				C-reactive protein (CRP) &/or erythrocyte sedimentation rate (ESR) - may or may not be monitored by the specialist. The decision to monitor is dependent on the patient's risk	
	6 weeks – 3 months	Monthly	✓	✓	✓					
	>3 months and stable dose for 6 weeks	3 monthly	✓	✓	✓					
	Any dose increase	2 weeks post dose increase then revert to above protocol	✓	✓	✓					
Leflunomide **WITHOUT** another immunosuppressant or methotrexate	As for methotrexate or azathioprine	**As for methotrexate or azathioprine**				✓	✓ **At each visit**			
Leflunomide **AND** another immunosuppressant or methotrexate	As for methotrexate or azathioprine, except for **> 3 months**	**Continue monthly** Dose increase monitoring as above	✓	✓	✓	✓	✓ **At each visit**			
Ciclosporin	As for methotrexate or azathioprine, except for **> 3 months**	**Continue monthly** Dose increase monitoring as above	✓	✓	✓	✓		✓ **Annual** except after dose change		Annual lipids, uric acid and serum magnesium
Sulfasalazine	As for methotrexate or azathioprine, except for **> 12 months**	After 12 months no routine monitoring is required for the majority of patients (unless there is a dose change). **The decision to discontinue monitoring should be following advice from the specialist.** Annual serum creatinine or eGFR may be considered.								
Hydroxychloroquine	No routine primary care blood monitoring is required.	Annual optician review (arranged by the patient). Referral to ophthalmology after 5 years [unless other risk factors] is the responsibility of the specialist. The patient must be advised to report any visual disturbances immediately to the GP / Optometrist.								