

Ketorolac

Created: 6/8/17 Reviewed: 5/13/19

Includes:

Toradol© Ketorolac

*This policy applies only to oral ketorolac tablets prescribed for outpatient use. Injectable ketorolac administered at the provider office is not included as part of this drug use criteria for coverage.

GUIDELINE FOR USE:

- 1. Is the medication being used to treat a funded condition for coverage by Oregon Health Plan?
 - a. If yes, continue to 2
 - b. If no, deny as below the line.
- 2. Is the medication being used to treat kidney stones?
 - a. If yes, go to 3.
 - b. If no, deny as nonformulary and recommend use of a formulary NSAID such as ibuprofen, naproxen, diclofenac or meloxicam.
- 3. Is the dose prescribed less than 40mg/day and duration does not exceed 5 days and no contraindications to therapy exist (see below section on Contraindications)?
 - a. If yes, approve for 5 days of therapy.
 - b. If no, deny as not meeting criteria. Off label use of medications is not a covered benefit on OHP.

Rationale:

Due to the high risk of adverse events associated with ketorolac and the availability of safer alternative therapies, ketorolac will only be covered when the above drug use criteria are met. Ketoralac should not be used in pediatric patients less than 17 years of age.

FDA Approved Indication:

Ketorolac is indicated for the short-term (\leq 5 days) management of moderate to severe acute pain requiring analgesia at the opioid level. Oral Ketorolac is only indicated as continuation treatment following IV or mg dosing of Ketorolac, if necessary. The total combined duration of use of Ketorolac tablets and injection should not exceed 5 days. Ketorolac is not indicated for use in pediatric patients and is not indicated for minor or chronic painful conditions. Increasing the dose of ketorolac beyond



labeled recommendations will not provide better efficacy but will increase the risk of developing serious adverse events.

Mechanism of Action:

Ketorolac reversibly inhibits the COX-1 and COX-2 enzymes which results in decreased formation of prostaglandin precursors.

Dosing:

20mg followed by 10mg every 4 to 6 hours as needed; maximum 40mg/day.

Contraindications:

- Hypersensitivity to ketorolac, aspirin, other NSAIDs,
- Active or history of peptic ulcer disease
- Recent or history of GI bleeding or perforation
- History of asthma, urticaria, or allergic-type reactions after taking aspirin or other NSAIDs
- Advanced renal disease or risk of renal failure (due to volume depletion)
- Prophylactic analgesic before any major surgery
- Suspected or confirmed cerebrovascular bleeding, hemorrhagic diathesis, incomplete hemostasis, or high risk of bleeding
- Concurrent use with aspirin, other NSAIDs, probenecid, or pentoxifylline
- Epidural or intrathecal administration (injection only)
- Use in the setting of coronary artery bypass graft (CABG) surgery
- Labor and delivery

References:

1. Ketorolac (systemic); Drug Information. UptoDate. Accessed April 18, 2019.

