

# Elotuzumab inj,lyphl (EMPLICITI)

## Criteria for Use

January 2025

VA Pharmacy Benefits Management Services and National Formulary Committee

*The following recommendations are based on medical evidence, clinician input, and expert opinion. The content of the document is dynamic and will be revised as new information becomes available. The purpose of this document is to assist practitioners in clinical decision-making, to standardize and improve the quality of patient care, and to promote cost-effective drug prescribing. THE CLINICIAN SHOULD USE THIS GUIDANCE AND INTERPRET IT IN THE CLINICAL CONTEXT OF THE INDIVIDUAL PATIENT. INDIVIDUAL CASES THAT ARE EXCEPTIONS TO THE EXCLUSION AND INCLUSION CRITERIA SHOULD BE ADJUDICATED AT THE LOCAL FACILITY ACCORDING TO THE POLICY AND PROCEDURES OF ITS P&T COMMITTEE AND PHARMACY SERVICES.*

The Product Information should be consulted for detailed prescribing information.

See the VA National Formulary Committee Monograph on this drug at the [PBM INTRAnet](#) site for further information.

### Exclusion Criteria

If the answer to ANY item below is met, then the patient should NOT receive elotuzumab.

- Hemoglobin < 8 g/dL; Must transfuse to hemoglobin above 8 gm/dL prior to therapy initiation
- Absolute neutrophil count (ANC) < 1000/mm<sup>3</sup>
- Platelet count < 50,000/mm<sup>3</sup> (<30,000/mm<sup>3</sup> if myeloma involvement in bone marrow > 50%)
- Total bilirubin ≥ 2x the upper limit of the normal range (except for Gilbert Syndrome: direct bilirubin ≥ 2 mg/dL) or ALT and AST > 3x upper limit of normal
- Eastern Cooperative Oncology Group performance status > 2
- Active or uncontrolled infection
- Known pregnancy
- Lactating

### Inclusion Criteria

All of the following criteria must be met.

- Diagnosis of relapsed or refractory multiple myeloma, following at least one prior line of therapy
- Care is provided by a VA or VA Community Care hematology/oncology provider
- Goals of care and role of Palliative Care consult have been discussed and documented

### Additional Inclusion Criteria

If applicable.

- Patients who can become pregnant and patients with partners who can become pregnant must comply with pregnancy testing and contraception requirements for lenalidomide or pomalidomide under their REMS programs

### Other Justification

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