

Commercial/Healthcare Exchange PA Criteria

Effective: April 18, 2019

Prior Authorization: Orphenadrine citrate- aspirin - caffeine oral tablets

Products Affected: Norgesic Forte 770mg-60mg-50mg (Aspirin - Caffeine - Orphenadrine Citrate) oral tablets, Norgesic 385 MG-30 MG-25 MG (Aspirin - Caffeine - Orphenadrine Citrate) oral tablets, Orphengesic Forte 770 MG-60 MG-50 MG (Aspirin - Caffeine - Orphenadrine Citrate) oral tablets

Medication Description: Orphenadrine citrate, aspirin, and caffeine oral tablets is a centrally acting antispasmodic which selectively blocks facilitatory functions of the reticular formulation. The mode of therapeutic action of orphenadrine has not been clearly identified but may be related to its analgesic properties. Orphenadrine citrate, aspirin, and caffeine oral tablets does not directly relax tense skeletal muscles.

Covered Uses:

1. Symptomatic relief of mild to moderate pain of acute musculoskeletal disorders.
2. Adjunct to rest, physical therapy, and other measures for the relief of discomfort associated with acute painful musculoskeletal conditions.

Exclusion Criteria:

1. Glaucoma
2. Pyloric or duodenal obstruction
3. Achalasia
4. Prostatic hypertrophy
5. Obstructions at the bladder neck
6. Myasthenia gravis
7. Hypersensitivity to aspirin or caffeine.

Required Medical Information:

1. Diagnosis
2. Previous medications tried/failed

Age Restrictions: 12 years of age and older

Prescriber Restrictions: None

Coverage Duration: 1 month

Other Criteria:

Orphenadrine citrate, aspirin, and caffeine oral tablets (Norgesic, Norgesic Forte, Orphengesic) may be approved if the patient meets ALL of the following criteria:

1. Patient has a diagnosis of mild to moderate pain due to an acute musculoskeletal disorder, **AND**
2. Patient is age 12 or older, **AND**
3. Patient will not be taking more than 4 tablets per day, **AND**

4. Patient has had an adequate trial and failure of ALL of the following antispasmodic therapies together WITH an NSAID **AND** oral caffeine tablets:
 - a) Chlorzoxazone; **AND**
 - b) Cyclobenzaprine; **AND**
 - c) Metaxalone; **AND**
 - d) Methocarbamol; **AND**
 - e) Orphenadrine citrate; **AND**

References:

1. Norgesic Forte [prescribing information]. Owens Cross Roads, AL: Poly Pharmaceuticals, Inc.; July 2019.
2. Micromedex® Healthcare Series: Thomson Micromedex, Greenwood Village, Co. 2019 Available at: <https://www.micromedexsolutions.com>. Updated August 2, 2022. Accessed July 18, 2022.
3. Product Information: ORPHENGESIC(R) FORTE oral tablets, orphenadrine citrate, aspirin, caffeine oral tablets. Galt Pharmaceuticals (per manufacturer), Atlanta, GA, 2020

Policy Revision history

Rev #	Type of Change	Summary of Change	Sections Affected	Date
1	New Policy	New Policy	All	4/18/2019
2	Update	Added orphenadrine citrate, aspirin and caffeine oral tablets available strengths. Name change from Norgesic Forte to orphenadrine citrate, aspirin, and caffeine. Added hypersensitivity to aspirin/caffeine. Updated other criteria to include generic availability	Products Affected, Prior Authorization, Exclusion Criteria, Other Criteria	7/18/2022