

**JOURNAVX  
(suzetrigine)**

**Pre - PA Allowance**

**Quantity** 30 tablets

**Duration** 365 days

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**Prior-Approval Requirements**

**Age** 18 years of age or older

**Diagnosis**

Patient must have the following:

Moderate to severe acute pain

**AND NONE** of the following:

- a. Severe hepatic impairment (Child-Pugh Class C)

**Prior - Approval Limits**

**Quantity** 60 tablets

**Duration** 28 days

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**Prior – Approval *Renewal* Requirements**

Same as above

**Prior - Approval *Renewal* Limits**

Same as above