Here's a structured eligibility‑criteria form tailored for Type 2 diabetes patients in Wales who may be considered for prescription of **tirzepatide (Mounjaro®)**, based on the final **NICE Technology Appraisal TA924**, as implemented via Welsh policy:

**Mounjaro (Tirzepatide) Eligibility Criteria Form (type 2 diabetes).**

**For adults (≥ 18 years) with Type 2 diabetes in Wales**

**1. Glycaemic treatment history**

* **Triple therapy**: Patient has been on metformin plus **two other oral antidiabetic agents** and:
  + HbA₁c remains above target (above 58mmol/mol), or
  + The regimen is **not tolerated**, or
  + **Contraindications exist** to continuing the therapy  
    → Consider switching one agent to a GLP‑1RA (semaglutide, dulaglutide) or tirzepatide as an alternative

**2. Body Mass Index (BMI) thresholds**

* **General threshold**: BMI ≥ 35 kg/m² **plus** at least one obesity‑related medical or psychological problem
* **Lower BMI allowed** (typically BMI ≥ 32.5 kg/m²): for people of South Asian, Chinese, other Asian, Middle Eastern, Black African or African‑Caribbean backgrounds; if insulin therapy would significantly disrupt occupation, or if **weight loss** would improve other obesity‑related complications

**3. Exclusion criteria**

* Patient **must not** be on another GLP‑1RA (e.g. semaglutide, liraglutide, dulaglutide, exenatide, combination products) concurrently with tirzepatide
* Any patients with active retinal disease (i.e non- proliferative/ proliferative retinopathy or maculopathy) who require ophthalmology input.
* Past medical history of pancreatitis.

**Mounjaro (Tirzepatide) Eligibility Criteria Form (weight management).**

**1. Specialist service prescribing for weight‑management pathways**

* In **Wales**, tirzepatide **must be initiated and prescribed only within specialist**

**weight‑management services** (typically All‑Wales Weight Management Pathway level 3),

* **Primary care initiation is currently not permitted** unless patient was started before the circular was issued.

**2. Accompanied by behavioural support intervention**

* Prescription **must** be part of a structured programme including:
  + Calorie‑restricted diet, and
  + Increased physical activity and behavioural counselling

**📋 Eligibility Checklist (tick ✔ if yes):**

| **Criterion** | **Eligible?** |
| --- | --- |
| Adult (≥ 18 years) | ☐ |
| Type 2 diabetes diagnosis | ☐ |
| On metformin and 2 other oral agents (gliflozins, gliptins, gliclazide, pioglitazone), however diabetes remains inadequately controlled  (or intolerance or contraindication to the oral agents listed above) | ☐ |
| BMI ≥ 35 kg/m² with ≥ 1 obesity‑related problem **or** lower BMI threshold with occupational or medical benefit | ☐ |
| Not currently on another GLP‑1RA (e.g. semaglutide) | ☐ |
| Recent retinal screening done and shows no contraindication | ☐ |
| Agreement to structured diet/exercise/behavioural programme | ☐ |
| Plan for HbA₁c monitoring and safety follow‑up | ☐ |

(all of the above criteria must be met)

**Intensification of treatment.**

* Mounjaro is commenced at a dose of 2.5mg for one month and then increased to the maintenance dose of 5mg if tolerated.
* When using Mounjaro to treat diabetes, the 5mg dose has been shown to provide sufficient glucose lowering (the higher doses are used more to target weight loss).
* Recommendation is that patients remain on 5mg for a sufficient length of time (ideally until next diabetic review). Should their HbA₁c remain above target then the dose can be increased.
* If their HbA₁c is to target, we cannot increase Mounjaro dose.
* Maintenance doses of Mounjaro are 5mg, 10mg, 15mg.

**✅ Summary**

Based on NICE TA 924 and Welsh Government guidance, Mounjaro can be prescribed for type 2 diabetes patients in primary care in Wales **only when**:

* Triple oral therapy has failed or isn't tolerated
* The patient meets BMI and comorbidity criteria (with certain lowered thresholds for ethnic‑minority groups)
* It is delivered alongside comprehensive lifestyle support and monitored closely.