Mektovi

Oman · access guide

How to access Mektovi from Oman, the named-patient import pathway, 2026

By Reserve Meds · Clinical & regulatory team · Last reviewed 2026-04-23

A Oman patient diagnosed with BRAF V600E or V600K mutant advanced melanoma may receive a prescription for Mektovi (binimetinib) from their treating medical oncologist, to be used in combination with Braftovi (encorafenib). Mektovi is FDA-approved in the United States as part of this targeted combination. In the Kingdom of Oman, Mektovi may not be uniformly stocked across tertiary oncology centres, which is why your oncologist may be coordinating a named-patient import pathway on your behalf, typically alongside Braftovi as part of the combination regimen.

This guide explains the legal pathway, what documentation your physician needs, typical timing and cost bands, and where Reserve Meds fits in.

The clinical situation

Mektovi is an oral selective MEK1/MEK2 kinase inhibitor. It is used in combination with encorafenib (Braftovi) for BRAF V600E/K mutant advanced melanoma to improve response durability and tolerability versus BRAF-inhibitor monotherapy. The manufacturer is Pfizer. Dosing is typically 45 mg orally twice daily continuously. Monitoring includes cardiac function (LVEF), ocular adverse events (retinal vein occlusion, retinopathy), rhabdomyolysis/CPK, liver enzymes, and venous thromboembolism. Your oncologist will confirm BRAF status and combination planning.

Is Mektovi legally importable into Oman?

Yes, through the Directorate General of Pharmaceutical Affairs and Drug Control (DGPADC) named-patient import framework. The Oman has a mature named-patient mechanism that has supported cross-border access to specialised oncology products for many years, including combination targeted therapies.

The DGPADC named-patient route allows a Oman-licensed physician to request import of a medicine that is not locally registered when: (a) the medicine has been approved by a recognised reference authority (FDA qualifies), (b) there is no clinically equivalent locally registered alternative, (c) the treating physician takes clinical responsibility for use, and (d) the importing party documents chain of custody from the US source to the administering facility. Combination-regimen applications are filed as a linked pair where appropriate.

How the pathway works, step by step

1. **Consultation with your treating oncologist.** The decision to prescribe Mektovi in combination with Braftovi is clinical, based on BRAF status and disease burden. Your oncologist documents the rationale.
2. **Administering facility identification.** A Oman tertiary oncology centre with an importing pharmacy files on behalf of the physician.
3. **DGPADC named-patient application.** Your physician or the hospital's importing pharmacy files an application with DGPADC including clinical rationale, the combination regimen, patient identifier, product details, and chain-of-custody plan.
4. **US-side sourcing.** Reserve Meds coordinates with our US-licensed specialty wholesale partner to secure product from the manufacturer's authorised distribution chain under DSCSA.
5. **Temperature-controlled shipment.** Mektovi is a stable oral tablet; shipments travel with tamper-evident packaging and end-to-end documentation.
6. **Arrival and dispensing support.** Your oncologist remains the treating clinician. Reserve Meds coordinates re-supply ahead of cycle end to avoid treatment gaps.

What documentation your physician needs

Your physician will typically need to provide:

- A clinical rationale letter confirming BRAF status, combination regimen, prior therapies, and Mektovi as the indicated treatment
- Verification of their Oman medical licence (SCFHS / MOH)
- A current prescription naming the product, strength, and quantity
- Patient identifier (anonymised reference preferred)
- The planned treatment cadence (continuous twice-daily therapy with monthly re-supply)

Reserve Meds provides a physician documentation kit that bundles the templates DGPADC reviewers expect to see for combination oncology regimens under named-patient import.

Costs and timing

Mektovi's US cash-pay drug-only reference price for a 30-day supply sits in an indicative 2026 drug-only range (delivered quote issued at intake) of roughly USD 10,000-12,000. The combination partner (Braftovi) is costed separately. Logistics, DGPADC documentation handling, and concierge coordination add incremental cost; Reserve Meds issues a full transparent quote at the start of intake.

Indicative timing for first shipment arrival after cohort intake opens is 7-14 days from the moment a complete DGPADC application is submitted. Subsequent re-supply cycles are generally faster once the pathway is established.

Fulfillment availability is limited to our first cohort, and all timelines published on this site are indicative. If your clinical situation is time-sensitive, tell us at intake. We triage accordingly.

A brief culturally-aware note: Ramadan and Hajj seasons can affect scheduling across Oman tertiary centres. Our concierge team coordinates re-supply timing with your family's preferences and your hospital's calendar.

Reserve Meds's role

Reserve Meds is a US-based concierge coordinator for cross-border specialty medicine. For Mektovi specifically, we provide:

- **Sourcing.** Through our US-licensed specialty wholesale partner, operating under DSCSA chain-of-custody.
- **Documentation.** Regulatory documentation package for your physician and for DGPADC review, covering the full combination regimen.
- **Logistics.** Temperature-stable shipment and chain-of-custody coordination.
- **Concierge case lead.** A named point of contact for your family and your physician throughout the process.

What we do not do: we are not the prescriber, we do not practise medicine, and we are not the dispensing pharmacy. All clinical decisions remain with your treating oncologist.

Frequently asked

Is this legal in Oman? Yes, when executed through the DGPADC named-patient framework with appropriate documentation. See our trust and compliance page.

Can Mektovi and Braftovi be coordinated together? Yes, the combination is standard of care; we coordinate both components under a single case.

What about ocular side effects? MEK inhibitors can cause retinopathy or retinal vein occlusion. Your oncologist will arrange baseline and periodic ophthalmology review. We coordinate supply, not clinical surveillance.

Will private insurance cover this? Cash-pay is the default. Some Oman private insurers reimburse named-patient imports on case-by-case approval; we supply documentation for your submission but do not process insurance claims directly.

Reserve Meds's role

US-based concierge coordinator for cross-border specialty medicine. We are not the prescriber, not the dispensing pharmacy, and not the manufacturer. All clinical decisions remain with your treating physician.

Composite case examples. This document is for general information only and does not constitute medical advice. Please consult your treating physician.
Reserve Meds is in pre-launch. Published timelines and cost ranges are indicative, not guarantees.
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