

## Pluvicto

Oman · access guide

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

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

A Oman patient with metastatic castration-resistant prostate cancer (mCRPC) may receive a prescription for Pluvicto (lutetium Lu-177 vipivotide tetraxetan) from their treating oncologist after progression on standard hormonal and taxane-based therapies. Pluvicto is FDA-approved, manufactured in the United States, and is a recognised option for PSMA-positive mCRPC. In the Kingdom of Oman, Pluvicto is not yet broadly registered for routine hospital-pharmacy dispensing, which is why your oncologist may be coordinating a named-patient import pathway on your behalf.

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

Pluvicto is a radioligand therapy that delivers targeted beta-radiation to PSMA-expressing prostate cancer cells. Eligibility typically requires PSMA-PET imaging confirmation, documented prior therapy consistent with FDA labeling, and management by a medical oncologist working alongside a licensed nuclear medicine service. The manufacturer is Novartis. Because Pluvicto is a short-half-life radiopharmaceutical, it must be shipped against a tight decay calendar and can only be administered at a facility licensed to handle radioactive therapeutics. Your oncologist will confirm PSMA eligibility and sequencing against your overall treatment plan.

## Is Pluvicto legally importable into Oman?

Yes, through the Directorate General of Pharmaceutical Affairs and Drug Control (DGPADC) named-patient import framework, in coordination with the administering hospital's nuclear medicine and radiation-safety departments. The Oman has a mature named-patient mechanism that has supported cross-border access to specialised oncology and rare-disease products for many years.

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. Applications are reviewed by the DGPADC Drug Sector.

For Pluvicto specifically, the pathway additionally requires coordination with the Nuclear and Radiological Regulatory Commission and with the hospital's radiopharmacy. Administration is only permitted at facilities holding the appropriate radiation-handling licensure.

## How the pathway works, step by step

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1. **Consultation with your treating oncologist.** The decision to prescribe Pluvicto is a clinical one. Your oncologist will document PSMA-PET findings, prior line history, and a written clinical rationale.
2. **Nuclear medicine facility identification.** A licensed nuclear medicine unit must accept the case. Several tertiary centres in Riyadh, Jeddah, and the Eastern Province hold the relevant licensure.
3. **DGPADC named-patient application.** Your physician or the hospital's importing pharmacy files an application with DGPADC, including clinical rationale, patient reference, 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. Because of the radioactive decay calendar, the shipping window is booked to match your administration date.
5. **Radiation-compliant shipment.** The product moves with radiation-handling, temperature, and chain-of-custody documentation end to end.
6. **Arrival and administration.** The licensed facility receives the dose and administers under your oncologist's care. Subsequent cycles are scheduled, typically at six-week intervals.

## What documentation your physician needs

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Your physician will typically need to provide:

- A clinical rationale letter confirming diagnosis, prior therapies, and Pluvicto as the indicated next step
- Verification of their Oman medical licence (SCFHS / MOH)
- Identification of the administering nuclear medicine facility and its radiation-handling licence
- Patient identifier (an anonymised patient reference is preferred for privacy)
- The planned administration cycle (typically four to six doses, six weeks apart, per FDA labeling)

Reserve Meds provides a physician documentation kit that bundles the templates most DGPADC reviewers expect to see. Your oncologist does not need prior named-patient experience; the kit is designed to make a first-time application straightforward.

## Costs and timing

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Pluvicto's US cash-pay drug-only reference price for a single dose sits in an indicative 2026 drug-only range (delivered quote issued at intake) of roughly USD 45,000-50,000, with a full course typically running four to six doses. Radiation-compliant 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 the first dose after cohort intake opens is 7-14 days from the moment a complete DGPADC application is submitted. Subsequent cycles are generally faster once the pathway is established and the administering facility is familiar with the case.

*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 cycle timing with your family's preferences and your hospital's calendar.

## Reserve Meds's role

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Reserve Meds is a US-based concierge coordinator for cross-border specialty medicine. For Pluvicto 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.
- **Logistics.** Radiation-compliant and temperature-controlled shipment 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 and the administering nuclear medicine facility.

## Frequently asked

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**Is this legal in Oman?** Yes, when executed through the DGPADC named-patient framework with appropriate documentation and a licensed administering facility. This pathway has been used routinely across oncology and rare disease for many years. See our trust and compliance page for our methodology.

**What if my oncologist has not done this before?** Named-patient import is an institutional process your oncologist's hospital will have encountered, even if the individual physician has not. Our documentation kit closes the gap for first-time applicants.

**What if the shipment is delayed?** Pluvicto's short half-life means scheduling precision matters. Our protocol builds in buffer time. In the rare event of a delay that causes the product to decay below usable activity, we re-source at our cost per service terms and reschedule with the facility.

**What about adverse-event reporting?** Your oncologist and the administering team manage clinical care and adverse-event reporting. We document and forward events to the manufacturer as part of pharmacovigilance obligations when requested.

**Will private insurance cover this?** Cash-pay is the default. Some Oman private insurers reimburse named-patient imports on a case-by-case basis; 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.

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### **Reserve Meds**

*reserved for you.*

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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