

IP ADO-TRASTUZUMAB EMTASINE

Types: ONCOLOGY TREATMENT

Synonyms: ADO-TRASTUZUMAB, KADCYLA, ALTHO, CAD, BREAST

Cycle 1	Repeat 1 time	Cycle length: 21 days
Day 1 Perform every 1 day x1		
Labs		
<input checked="" type="checkbox"/>	COMPREHENSIVE METABOLIC PANEL	Interval: Once Occurrences: --
<input checked="" type="checkbox"/>	CBC WITH PLATELET AND DIFFERENTIAL	Interval: Once Occurrences: --
<input checked="" type="checkbox"/>	MAGNESIUM LEVEL	Interval: Once Occurrences: --
<input type="checkbox"/>	URINALYSIS, AUTOMATED WITH MICROSCOPY	Interval: Once Occurrences: --
<input type="checkbox"/>	CANCER ANTIGEN 27-29 (CA BR)	Interval: Once Occurrences: --
Provider Communication		
	ONC PROVIDER COMMUNICATION	Interval: Until discontinued Occurrences: --
	Comments:	Verify Ejection Fraction prior to Cycle 1. Ejection Fraction: ***% on *** (date).
		If patient has not had a recent MUGA or ECHO, order one via order entry. A baseline cardiac evaluation with a MUGA scan or an ECHO is recommended, especially in patients with risk factors for increased cardiac toxicity. Repeated MUGA or ECHO determinations of LVEF should be performed, particularly with higher, cumulative anthracycline doses.
Nursing Orders		
	TREATMENT CONDITIONS 13	Interval: Until discontinued Occurrences: --
	Comments:	HOLD and notify provider if ANC LESS than 1500; Platelets LESS than 100,000; Total Bilirubin GREATER than 1.5; AST/ALT GREATER than 5 upper normal limit
Line Flush		
	sodium chloride 0.9 % flush 20 mL	Dose: 20 mL Route: intravenous PRN
	Start: S	
Nursing Orders		
	sodium chloride 0.9 % infusion 250 mL	Dose: 250 mL Route: intravenous once @ 30 mL/hr for 1 dose
	Start: S	
	Instructions:	To keep vein open.
Pre-Medications		

ondansetron (ZOFRAN) injection 8 mg

Dose: 8 mg Route: intravenous once for 1 dose
Start: S End: S 11:15 AM

ondansetron (ZOFRAN) tablet 16 mg

Dose: 16 mg Route: oral once for 1 dose
Start: S

ondansetron (ZOFRAN) 16 mg in dextrose 5% 50 mL IVPB

Dose: 16 mg Route: intravenous once over 15 Minutes for 1 dose
Start: S End: S 11:00 AM

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	ONDANSETRON HCL (PF) 4 MG/2 ML INJECTION SOLUTION	Medications	16 mg	Main Ingredient	No
	DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	Base	50 mL	Always	Yes

Pre-Medications

diphenhydrAMINE (BENADRYL) injection 25 mg

Dose: 25 mg Route: intravenous once for 1 dose
Start: S
Instructions:
Administer via slow IV push 30 minutes prior to chemotherapy.

diphenhydrAMINE (BENADRYL) 50 mg in sodium chloride 0.9 % 50 mL IVPB

Dose: 50 mg Route: intravenous once over 15 Minutes for 1 dose
Start: S End: S 11:45 AM
Instructions:
Administer 30 minutes prior to chemotherapy.

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	DIPHENHYDRAMIN E 50 MG/ML INJECTION SOLUTION	Medications	50 mg	Main Ingredient	No
	SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	Base	50 mL	Yes	Yes
	DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	Base	50 mL	No	Yes

diphenhydrAMINE (BENADRYL) tablet 25 mg

Dose: 25 mg Route: oral once for 1 dose
Offset: 0 Hours
Instructions:
Administer 30 minutes prior to chemotherapy.

diphenhydrAMINE (BENADRYL) tablet 50 mg

Dose: 50 mg Route: oral once for 1 dose
Offset: 0 Hours

Instructions:
Administer 30 minutes prior to chemotherapy.

famotidine (PEPCID) 20 mg/2 mL injection 20 mg

Dose: 20 mg Route: intravenous once for 1 dose
Offset: 0 Hours

Instructions:
Administer 30 minutes prior to chemotherapy.

famotidine (PEPCID) tablet 20 mg

Dose: 20 mg Route: oral once for 1 dose
Offset: 0 Hours

Instructions:
Administer 30 minutes prior to chemotherapy.

acetaminophen (TYLENOL) tablet 650 mg

Dose: 650 mg Route: oral once for 1 dose
Offset: 0 Hours

Instructions:
Administer 30 minutes prior to chemotherapy.

Chemotherapy

ado-trastuzumab (KADCYLA) 3.6 mg/kg in sodium chloride 0.9 % 250 mL IVPB

Dose: 3.6 mg/kg Route: intravenous once over 90 Minutes for 1 dose
Offset: 30 Minutes

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	ADO-TRASTUZUM AB EMTANSINE 160 MG INTRAVENOUS SOLUTION	Medications	3.6 mg/kg	Main Ingredient	Yes
	SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	QS Base	250 mL	Yes	Yes

Supportive Care

LORAZepam (ATIVAN) injection 1 mg

Dose: 1 mg Route: intravenous PRN
Start: S

LORAZepam (ATIVAN) tablet 1 mg

Dose: 1 mg Route: oral PRN
Start: S

Supportive Care

promethazine (PHENERGAN) injection 12.5 mg

Dose: 12.5 mg Route: injection every 6 hours PRN
Start: S

Discharge Nursing Orders

sodium chloride 0.9 % flush 20 mL

Dose: 20 mL Route: intravenous PRN

HEParin, porcine (PF) injection 500 Units

Dose: 500 Units Route: intra-catheter once PRN

Start: S

Instructions:

Concentration: 100 units/mL. Heparin flush for
Implanted Vascular Access Device
maintenance.

Post-Medications

○ **TBO-FILGRASTIM INJECTION ORDERABLE
solution**

Dose: -- Route: subcutaneous

Start: S

Rule-Based Template: RULE ONCBCN
NEUPOGEN WEIGHT BASED

Conditions:

Weight > 72 kg

Weight <= 72 kg

Modifications:

Set dose to 480 mcg

Set dose to 300 mcg