

IP BENDAMUSTINE / BORTEZOMIB / PREDNISONE

Types: ONCOLOGY TREATMENT

Synonyms: BORTEZOMIB, VELCADE, MM, BORETEZOMIB, MYELOMA, MULTIPLE, BENDEKA, VELC, PRED, DELT, BENDA

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 checked="" type="checkbox"/>	LDH	Interval: Once Occurrences: --
<input checked="" type="checkbox"/>	URIC ACID LEVEL	Interval: Once Occurrences: --
<input checked="" type="checkbox"/>	PHOSPHORUS LEVEL	Interval: Once Occurrences: --
Provider Communication		
	ONC PROVIDER COMMUNICATION 5	Interval: Once Occurrences: -- Comments: Use baseline weight to calculate dose. Adjust dose for weight gains/losses of greater than or equal to 10%.
Nursing Orders		
	TREATMENT CONDITIONS 7	Interval: Once Occurrences: -- Comments: HOLD and notify provider if ANC LESS than 1000; Platelets LESS than 100,000.
Nursing Orders		
	ONC NURSING COMMUNICATION 51	Interval: Once Occurrences: -- Comments: HOLD Bortezomib and notify provider if Hgb is LESS than or equal to *** g/dL.
Vitals		
	ONC NURSING COMMUNICATION 50	Interval: Once Occurrences: -- Comments: 1) Check vital signs (BP, temperature, pulse, and respirations) prior to and 30 minutes after Bortezomib administration. 2) If systolic BP, 30 minutes after Bortezomib infusion, drops more than 30 mmHg, or if systolic BP is less than 90, please contact MD.
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 (ZOFTRAN) 16 mg in sodium chloride 0.9% 50 mL IVPB

Dose: -- Route: intravenous once over 15 Minutes for 1 dose

Start: S

Ingredients:

Name	Type	Dose	Selected	Adds Vol.
ONDANSETRON HCL (PF) 4 MG/2 ML INJECTION SOLUTION	Medications	16 mg	Yes	No
DEXAMETHASONE 4 MG/ML INJECTION SOLUTION	Medications	12 mg	No	No
SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	Base	50 mL	Always	Yes
DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	Base		No	Yes

ondansetron (ZOFTRAN) tablet 16 mg

Dose: 16 mg Route: oral once for 1 dose

Start: S

dexamethasone (DECADRON) tablet 12 mg

Dose: 12 mg Route: oral once for 1 dose

Start: S

aprepitant (CINVANTI) 130 mg in dextrose (NON-PVC) 5% 130 mL IVPB

Dose: 130 mg Route: intravenous once over 30 Minutes for 1 dose

Start: S

End: S

Ingredients:

Name	Type	Dose	Selected	Adds Vol.
APREPITANT 7.2 MG/ML INTRAVENOUS EMULSION	Medications	130 mg	Main Ingredient	Yes
DEXTROSE 5 % IN WATER (D5W) IV SOLP (EXCEL; NON-PVC)	Base	130 mL	Yes	Yes
SODIUM CHLORIDE 0.9 % IV SOLP (EXCEL;NON-PVC)	Base	130 mL	No	Yes

Supportive Care

predniSONE (DELTASONE) tablet 100 mg

Dose: 100 mg Route: oral daily

Chemotherapy

bendamustine (BENDEKA) 60 mg/m2 in

sodium chloride 0.9 % 50 mL chemo IVPBDose: 60 mg/m²

Route: intravenous

once over 10 Minutes for 1 dose

Offset: 30 Minutes

Instructions:

VESICANT

Ingredients:**Name**BENDAMUSTINE
25 MG/ML
INTRAVENOUS
SOLUTION
SODIUM
CHLORIDE 0.9 %
INTRAVENOUS
SOLUTION**Type**Medications

Base**Dose**60 mg/m²

50 mL**Selected**
Main
Ingredient

Yes

Adds Vol.

Yes

Yes

Chemotherapy

bortezomib (VelCADE) 1.3 mg/m² in sodium chloride 0.9 % chemo injectionDose: 1.3 mg/m²

Route: subcutaneous

once for 1 dose

Offset: 45 Minutes

Instructions:

DRUG IS AN IRRITANT. Administer drug slowly to prevent burning upon administration.

Ingredients:**Name**BORTEZOMIB 3.5
MG SOLUTION
FOR INJECTION
SODIUM
CHLORIDE 0.9 %
INJECTION
SOLUTION**Type**Medications

Base**Dose**1.3
mg/m²**Selected**
Main
Ingredient

Always

Adds Vol.

No

Yes

Hematology & Oncology Hypersensitivity Reaction Standing Order

ONC NURSING COMMUNICATION 82

Interval: Until discontinued

Occurrences: --

Comments:

Grade 1 - MILD Symptoms (cutaneous and subcutaneous symptoms only – itching, flushing, periorbital edema, rash, or runny nose)

1. Stop the infusion.
2. Place the patient on continuous monitoring.
3. Obtain vital signs.
4. Administer Normal Saline at 50 mL per hour using a new bag and new intravenous tubing.
5. If greater than or equal to 30 minutes since the last dose of Diphenhydramine, administer Diphenhydramine 25 mg intravenous once.
6. If less than 30 minutes since the last dose of Diphenhydramine, administer Fexofenadine 180 mg orally and Famotidine 20 mg intravenous once.
7. Notify the treating physician.
8. If no improvement after 15 minutes, advance level of care to Grade 2 (Moderate) or Grade 3 (Severe).
9. Assess vital signs every 15 minutes until resolution of symptoms or otherwise ordered by covering physician.

ONC NURSING COMMUNICATION 83

Interval: Until discontinued

Occurrences: --

Comments:

Grade 2 – MODERATE Symptoms (cardiovascular, respiratory, or gastrointestinal symptoms – shortness of breath, wheezing, nausea, vomiting, dizziness, diaphoresis, throat or chest tightness, abdominal or back pain)

1. Stop the infusion.
2. Notify the CERT team and treating physician immediately.
3. Place the patient on continuous monitoring.
4. Obtain vital signs.
5. Administer Oxygen at 2 L per minute via nasal cannula. Titrate to maintain O₂ saturation of greater than or equal to 92%.
6. Administer Normal Saline at 150 mL per hour using a new bag and new intravenous tubing.
7. Administer Hydrocortisone 100 mg intravenous (if patient has allergy to Hydrocortisone, please administer Dexamethasone 4 mg intravenous), Fexofenadine 180 mg orally and Famotidine 20 mg intravenous once.
8. If no improvement after 15 minutes, advance level of care to Grade 3 (Severe).
9. Assess vital signs every 15 minutes until resolution of symptoms or otherwise ordered by covering physician.

ONC NURSING COMMUNICATION 4

Interval: Until discontinued
Comments:

Occurrences: --

Grade 3 – SEVERE Symptoms (hypoxia, hypotension, or neurologic compromise – cyanosis or O₂ saturation less than 92%, hypotension with systolic blood pressure less than 90 mmHg, confusion, collapse, loss of consciousness, or incontinence)

1. Stop the infusion.
2. Notify the CERT team and treating physician immediately.
3. Place the patient on continuous monitoring.
4. Obtain vital signs.
5. If heart rate is less than 50 or greater than 120, or blood pressure is less than 90/50 mmHg, place patient in reclined or flattened position.
6. Administer Oxygen at 2 L per minute via nasal cannula. Titrate to maintain O₂ saturation of greater than or equal to 92%.
7. Administer Normal Saline at 1000 mL intravenous bolus using a new bag and new intravenous tubing.
8. Administer Hydrocortisone 100 mg intravenous (if patient has allergy to Hydrocortisone, please administer Dexamethasone 4 mg intravenous) and Famotidine 20 mg intravenous once.
9. Administer Epinephrine (1:1000) 0.3 mg subcutaneous.
10. Assess vital signs every 15 minutes until resolution of symptoms or otherwise ordered by covering physician.

diphenhydramine (BENADRYL) injection 25 mg

Dose: 25 mg Route: intravenous PRN
Start: S

fexofenadine (ALLEGRA) tablet 180 mg

Dose: 180 mg Route: oral PRN
Start: S

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

Dose: 20 mg Route: intravenous PRN
Start: S

hydrocortisone sodium succinate (Solu-CORTEF) injection 100 mg

Dose: 100 mg Route: intravenous PRN

dexamethasone (DECADRON) injection 4 mg

Dose: 4 mg Route: intravenous PRN
Start: S

epINEPHrine (ADRENALIN) 1 mg/10 mL ADULT

injection syringe 0.3 mg

Dose: 0.3 mg Route: subcutaneous 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.

Day 2

Perform every 1 day x1

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) 16 mg in sodium chloride 0.9% 50 mL IVPB**

Dose: -- Route: intravenous once over 15 Minutes for 1 dose
 Start: S

Ingredients:

Name	Type	Dose	Selected	Adds Vol.
ONDANSETRON HCL (PF) 4 MG/2 ML INJECTION SOLUTION	Medications	16 mg	Yes	No
DEXAMETHASONE 4 MG/ML INJECTION SOLUTION	Medications	12 mg	No	No
SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	Base	50 mL	Always	Yes
DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	Base		No	Yes

 ondansetron (ZOFRAN) tablet 16 mg

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

 dexamethasone (DECADRON) tablet 12 mg

Dose: 12 mg Route: oral once for 1 dose
 Start: S

 aprepitant (CINVANTI) 130 mg in dextrose (NON-PVC) 5% 130 mL IVPB

Dose: 130 mg Route: intravenous once over 30 Minutes for 1 dose
 Start: S End: S

Ingredients:

Name	Type	Dose	Selected	Adds Vol.
APREPITANT 7.2 MG/ML	Medications	130 mg	Main Inredient	Yes

INTRAVENOUS EMULSION
 DEXTROSE 5 % IN Base 130 mL Yes Yes
 WATER (D5W) IV
 SOLP (EXCEL; NON-PVC)
 SODIUM Base 130 mL No Yes
 CHLORIDE 0.9 % IV
 SOLP
 (EXCEL;NON-PVC)

Chemotherapy

bendamustine (BENDEKA) 60 mg/m2 in sodium chloride 0.9 % 50 mL chemo IVPB

Dose: 60 mg/m2 Route: intravenous once over 10 Minutes for 1 dose
 Offset: 30 Minutes

Instructions:
 VESICANT

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	BENDAMUSTINE 25 MG/ML INTRAVENOUS SOLUTION	Medications	60 mg/m2	Main Ingredient	Yes
	SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	Base	50 mL	Yes	Yes

Day 4

Perform every 1 day x1

Vitals

ONC NURSING COMMUNICATION 50

Interval: Once Occurrences: --
 Comments: 1) Check vital signs (BP, temperature, pulse, and respirations) prior to and 30 minutes after Bortezomib administration.
 2) If systolic BP, 30 minutes after Bortezomib infusion, drops more than 30 mmHg, or if systolic BP is less than 90, please contact MD.

Chemotherapy

bortezomib (VelCADE) 1.3 mg/m2 in sodium chloride 0.9 % chemo injection

Dose: 1.3 mg/m2 Route: subcutaneous once for 1 dose
 Offset: 45 Minutes

Instructions:
 DRUG IS AN IRRITANT. Administer drug slowly to prevent burning upon administration.

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	BORTEZOMIB 3.5 MG SOLUTION FOR INJECTION	Medications	1.3 mg/m2	Main Ingredient	No
	SODIUM CHLORIDE 0.9 % INJECTION SOLUTION	Base		Always	Yes

Day 8

Perform every 1 day x1

Vitals

ONC NURSING COMMUNICATION 50

Interval: Once Occurrences: --
 Comments: 1) Check vital signs (BP, temperature, pulse, and respirations) prior to and 30 minutes after Bortezomib administration.
 2) If systolic BP, 30 minutes after Bortezomib infusion, drops more than

30 mmHg, or if systolic BP is less than 90, please contact MD.

Chemotherapy

bortezomib (VelCADE) 1.3 mg/m2 in sodium chloride 0.9 % chemo injection

Dose: 1.3 mg/m2 Route: subcutaneous once for 1 dose
Offset: 45 Minutes

Instructions:
DRUG IS AN IRRITANT. Administer drug slowly to prevent burning upon administration.

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	BORTEZOMIB 3.5 MG SOLUTION FOR INJECTION	Medications	1.3 mg/m2	Main Ingredient	No
	SODIUM CHLORIDE 0.9 % INJECTION SOLUTION	Base		Always	Yes

Day 11

Perform every 1 day x1

Vitals

ONC NURSING COMMUNICATION 50

Interval: Once Occurrences: --
Comments: 1) Check vital signs (BP, temperature, pulse, and respirations) prior to and 30 minutes after Bortezomib administration.

2) If systolic BP, 30 minutes after Bortezomib infusion, drops more than 30 mmHg, or if systolic BP is less than 90, please contact MD.

Chemotherapy

bortezomib (VelCADE) 1.3 mg/m2 in sodium chloride 0.9 % chemo injection

Dose: 1.3 mg/m2 Route: subcutaneous once for 1 dose
Offset: 45 Minutes

Instructions:
DRUG IS AN IRRITANT. Administer drug slowly to prevent burning upon administration.

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	BORTEZOMIB 3.5 MG SOLUTION FOR INJECTION	Medications	1.3 mg/m2	Main Ingredient	No
	SODIUM CHLORIDE 0.9 % INJECTION SOLUTION	Base		Always	Yes