

IP CAGT ALLOGENEIC SCT FLU-MEL (WITH TACROLIMUS & MINI METHOTREXATE GVHD PROPHYLAXIS)

Types: ONCOLOGY TREATMENT

Synonyms: FLU, FLUDARA, MELPHALAN, ALKERAN, SARCOLYSIN, MTX, METHOTREXATE, BMT, CAGT, ALLOGENEIC, SCT, FLUMEL

Transplant	Repeat 1 time	Cycle length: 90 days
Day -5 through -1 Perform every 1 day x1		
Line Flush		
sodium chloride 0.9 % flush 20 mL Dose: 20 mL Route: intravenous PRN Start: S		
Pre-Medications		
ondansetron (ZOFRAN) tablet 8 mg Dose: 8 mg Route: oral every 24 hours for 4 doses Start: S Instructions: Day -5 through Day -2		
OLANzapine (ZYPREXA) tablet 10 mg Dose: 10 mg Route: oral daily for 4 doses Start: S+4 8:00 AM Instructions: Day -1 through Day +2		
ondansetron (ZOFRAN) tablet 16 mg Dose: 16 mg Route: oral once for 1 dose Start: S+4 8:00 AM Instructions: Day -1 prior to Melphalan		
dexamethasone (DECADRON) tablet 12 mg Dose: 12 mg Route: oral once for 1 dose Start: S+4 8:00 AM Instructions: Day -1 prior to Melphalan		
ondansetron (ZOFRAN) tablet 8 mg Dose: 8 mg Route: oral every 8 hours for 10 doses Start: S+4 9:00 PM		
Antiemetics		
promethazine (PHENERGAN) injection 25 mg Dose: 25 mg Route: intravenous every 4 hours PRN Start: S		
Supportive Care		
acyclovir (ZOVIRAX) 5 mg/kg (Ideal) Dose: 5 mg/kg Route: intravenous every 8 hours Start: S		
fluconazole (DIFLUCAN) tablet 200 mg Dose: 200 mg Route: oral daily Start: S		
levoFLOxacIn (LEVAQUIN) tablet 500 mg Dose: 500 mg Route: oral daily at 0600 (time critical) Start: S+8 Instructions: Start Day +3		
Chemotherapy		
fludarabine (FLUDARA) 30 mg/m2 in sodium		

chloride 0.9% 100 mL chemo IVPBDose: 30 mg/m² Route: intravenous every 24 hours over 30 Minutes for 4 doses

Start: S

Instructions:

Day -5, -4, -3, -2.

Ingredients:

Name	Type	Dose	Selected	Adds Vol.
FLUDARABINE 50 MG INTRAVENOUS SOLUTION	Medications	30 mg/m ²	Main Ingredient	Yes
SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	QS Base	100 mL	Yes	Yes
DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	QS Base		No	Yes

ONC NURSING COMMUNICATION 30

Interval: Once

Occurrences: --

Comments:

Begin Melphalan infusion NO later than 10:00 am.

ONC NURSING COMMUNICATION 22

Interval: Once

Occurrences: --

Comments:

Provide ice chips and / or popsicles to patient 30 minutes prior, during and for 30 minutes following Melphalan infusion.

melphalan HCL (ALKERAN) 140 mg/m² in sodium chloride 0.9% 250 mL chemo IVPBDose: 140 mg/m² Route: intravenous once over 15 Minutes for 1 dose

Start: S+4 9:00 AM

Instructions:

Day -1.

Infuse within 60 minutes from vial reconstitution.

Ingredients:

Name	Type	Dose	Selected	Adds Vol.
MELPHALAN 50 MG INTRAVENOUS SOLUTION	Medications	140 mg/m ²	Main Ingredient	Yes
SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	QS Base	250 mL	Yes	Yes

Line Flush

sodium chloride 0.9 % flush 20 mL

Dose: 20 mL

Route: intravenous

PRN

Acute Graft Versus Host Prophylaxis

tacrolimus (PROGRAF) 0.02 mg/kg in sodium chloride (NON-PVC) 0.9 % 250 mL infusion

Dose: 0.02 mg/kg Route: intravenous every 24 hours over 24 Hours

Start: S+3 4:00 PM

Instructions:

Start Day -2.

Ingredients:

Name	Type	Dose	Selected	Adds Vol.
TACROLIMUS 5 MG/ML INTRAVENOUS SOLUTION	Medications	0.02 mg/kg	Main Ingredient	No
SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	Base	250 mL	Yes	Yes

CHLORIDE 0.9 % IV
 SOLP
 (EXCEL;NON-PVC)
 DEXTROSE 5 % IN Base 250 mL No Yes
 WATER (D5W) IV
 SOLP (EXCEL;
 NON-PVC)

Day 0 Perform every 1 day x1

Line Flush

sodium chloride 0.9 % flush 20 mL
 Dose: 20 mL Route: intravenous PRN
 Start: S

Pre-Medications

acetaminophen (TYLENOL) tablet 650 mg
 Dose: 650 mg Route: oral once for 1 dose
 Start: S
 Instructions:
 Premed for TRANSPLANT

diphenhydrAMINE (BENADRYL) injection 25 mg
 Dose: 25 mg Route: intravenous once for 1 dose
 Start: S
 Instructions:
 Premed for TRANSPLANT

hydrocortisone sodium succinate (Solu-CORTEF) injection 100 mg
 Dose: 100 mg Route: intravenous once for 1 dose
 Instructions:
 Premed for TRANSPLANT

Transplant Orders

ONC NURSING COMMUNICATION 55
 Interval: Once Occurrences: --
 Comments: -Oxygen at bedside during transplantation
 -Anaphylaxis precautions at bedside during transplant:

meperidine (DEMEROL) injection 12.5 mg
 Dose: 12.5 mg Route: intravenous every 15 min PRN for 3 doses
 Start: S
 Instructions:
 Administer every 15 minutes x 3 doses PRN for each episode of rigors (if rigors persist, call MD).

epINEPHrine (ADRENALIN) 1 mg/1 mL injection 0.3 mg
 Dose: 0.3 mg Route: subcutaneous PRN
 Start: S End: S+1

diphenhydrAMINE (BENADRYL) injection 25 mg
 Dose: 25 mg Route: intravenous PRN
 Start: S End: S+1

hydrocortisone sodium succinate (Solu-CORTEF) injection 100 mg
 Dose: 100 mg Route: intravenous PRN

Day 1 through 11 Perform every 1 day x1

Line Flush

sodium chloride 0.9 % flush 20 mL

Dose: 20 mL Route: intravenous PRN
Start: S

Antiemetics

**ondansetron ODT (ZOFTRAN-ODT)
disintegrating tablet 8 mg**
Dose: 8 mg Route: oral every 8 hours PRN
Start: S+2

Post-Transplant Orders

ONC NURSING COMMUNICATION 56
Interval: Once Occurrences: --
Comments: -Oxygen at bedside 24 hours after transplantation
 -Anaphylaxis precautions at bedside 24 hours after transplant:

meperidine (DEMEROL) injection 12.5 mg
Dose: 12.5 mg Route: intravenous every 15 min PRN for 3 doses
Start: S
Instructions:
Administer every 15 minutes x 3 doses PRN
for each episode of rigors (if rigors persist, call
MD).

**epINEPHrine (ADRENALIN) 1 mg/1 mL injection
0.3 mg**
Dose: 0.3 mg Route: subcutaneous PRN
Start: S End: S+1

**diphenhydRAMINE (BENADRYL) injection 25
mg**
Dose: 25 mg Route: intravenous PRN
Start: S End: S+1

**hydrocortisone sodium succinate
(Solu-CORTEF) injection 100 mg**
Dose: 100 mg Route: intravenous PRN

Acute Graft Versus Host Prophylaxis

**methotrexate PF 5 mg/m2 in sodium chloride
0.9% 50 mL chemo IVPB**
Dose: 5 mg/m2 Route: intravenous once over 15 Minutes for 1 dose
Start: S
Instructions:
HOLD UNTIL APPROVED BY CAGT.

Day +1.

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	METHOTREXATE SODIUM (PF) 25 MG/ML INJECTION SOLUTION	Medications	5 mg/m2	Main Ingredient	Yes
	DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	QS Base	50 mL	No	Yes
	SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	QS Base	50 mL	Yes	Yes

**methotrexate PF 5 mg/m2 in sodium chloride
0.9% 50 mL chemo IVPB**
Dose: 5 mg/m2 Route: intravenous once over 15 Minutes for 1 dose
Start: S+2
Instructions:

HOLD UNTIL APPROVED BY CAGT.

Day +3.

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	METHOTREXATE SODIUM (PF) 25 MG/ML INJECTION SOLUTION	Medications	5 mg/m2	Main Ingredient	Yes
	DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	QS Base	50 mL	No	Yes
	SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	QS Base	50 mL	Yes	Yes

methotrexate PF 5 mg/m2 in sodium chloride 0.9% 50 mL chemo IVPB

Dose: 5 mg/m2 Route: intravenous once over 15 Minutes for 1 dose

Start: S+5

Instructions:

HOLD UNTIL APPROVED BY CAGT.

Day +6.

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	METHOTREXATE SODIUM (PF) 25 MG/ML INJECTION SOLUTION	Medications	5 mg/m2	Main Ingredient	Yes
	DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	QS Base	50 mL	No	Yes
	SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	QS Base	50 mL	Yes	Yes

methotrexate PF 5 mg/m2 in sodium chloride 0.9% 50 mL chemo IVPB

Dose: 5 mg/m2 Route: intravenous once over 15 Minutes for 1 dose

Start: S+10

Instructions:

HOLD UNTIL APPROVED BY CAGT.

Day +11.

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	METHOTREXATE SODIUM (PF) 25 MG/ML INJECTION SOLUTION	Medications	5 mg/m2	Main Ingredient	Yes
	DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	QS Base	50 mL	No	Yes
	SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	QS Base	50 mL	Yes	Yes