

IP CARBOPLATIN (AUC=2) / GEMCITABINE (EVERY 21 DAYS)

Types: ONCOLOGY TREATMENT

Synonyms: GEMCITABINE, GEMZAR, BREAST, CARBOPLATIN, CARBO, PARAPLATIN

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: --	
Nursing Orders		
TREATMENT CONDITIONS 7	Interval: Until discontinued Occurrences: --	
Comments:	HOLD and notify provider if ANC LESS than 1000; Platelets LESS than 100,000.	
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.	
Hydration		
sodium chloride 0.9 % infusion 500 mL	Dose: 500 mL Route: intravenous once @ 500 mL/hr for 1 dose	
Start: S		
Pre-Medications		
<input checked="" type="checkbox"/> ondansetron (ZOFRAN) 16 mg, dexamethasone (DECADRON) 12 mg in sodium chloride 0.9% 50 mL IVPB	Dose: -- Route: intravenous once over 15 Minutes for 1 dose	
Start: S		
Ingredients:	Name	Type
	ONDANSETRON HCL (PF) 4 MG/2 ML INJECTION SOLUTION	Medications
	DEXAMETHASONE	Medications
		Dose
		16 mg
		12 mg
		Selected
		Yes
		Yes
		Adds Vol.
		No
		No

4 MG/ML
INJECTION
SOLUTION
SODIUM Base 50 mL Always Yes
CHLORIDE 0.9 %
INTRAVENOUS
SOLUTION
DEXTROSE 5 % IN Base No Yes
WATER (D5W)
INTRAVENOUS
SOLUTION

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 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) INTRAVENOUS SOLUTION	Base	130 mL	Yes	Yes
	SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	Base	130 mL	No	Yes

**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

Chemotherapy

**gemcitabine (GEMZAR) 1,000 mg/m2 in sodium
chloride 0.9 % 250 mL chemo IVPB**

Dose: 1,000 mg/m2 Route: intravenous once over 30 Minutes for 1 dose
Offset: 30 Minutes

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	GEMCITABINE 200 MG/5.26 ML (38	Medications	1,000 mg/m2	Main Ingredient	Yes

MG/ML)					
INTRAVENOUS SOLUTION					
SODIUM CHLORIDE 0.9 %	QS Base	250 mL	Yes	Yes	
INTRAVENOUS SOLUTION					
DEXTROSE 5 % IN WATER (D5W)	QS Base		No	Yes	
INTRAVENOUS SOLUTION					

Chemotherapy

CARBOplatin (PARAplatin) in dextrose 5% 250 mL chemo IVPB

AUC: 2 Use AUC Route: intravenous once over 60 Minutes for 1 dose
Offset: 1 Hours

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	CARBOPLATIN 10 MG/ML	Medications		Main Ingredient	Yes
	INTRAVENOUS SOLUTION				
	SODIUM CHLORIDE 0.9 %	QS Base	250 mL	No	Yes
	INTRAVENOUS SOLUTION				
	DEXTROSE 5 % IN WATER (D5W)	QS Base	250 mL	Yes	Yes
	INTRAVENOUS SOLUTION				

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

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

Occurrences: --

Comments:

- 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
Start: S

Route: intravenous PRN

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.

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

Day 8

Perform every 1 day x1

Labs

COMPREHENSIVE METABOLIC PANEL

Interval: Once Occurrences: --

CBC WITH PLATELET AND DIFFERENTIAL

Interval: Once Occurrences: --

MAGNESIUM LEVEL

Interval: Once Occurrences: --

URINALYSIS, AUTOMATED WITH MICROSCOPY

Interval: Once Occurrences: --

CANCER ANTIGEN 27-29 (CA BR)

Interval: Once Occurrences: --

Nursing Orders

TREATMENT CONDITIONS 7

Interval: Until Occurrences: --

discontinued

Comments:

HOLD and notify provider if ANC LESS than 1000; Platelets LESS than 100,000.

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.

Hydration

sodium chloride 0.9 % infusion 500 mL

Dose: 500 mL

Route: intravenous

once @ 500 mL/hr for 1 dose

Start: S

Pre-Medications

ondansetron (ZOFTRAN) 16 mg, dexamethasone

(DECADRON) 12 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

Yes

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 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

Yes

Ingredient

DEXTROSE 5 % IN
WATER (D5W)

Base

130 mL

Yes

Yes

INTRAVENOUS SOLUTION
SODIUM CHLORIDE 0.9 %
INTRAVENOUS SOLUTION

Base	130 mL	No	Yes
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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

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	SODIUM CHLORIDE 0.9 % IV SOLP (EXCEL;NON-PVC)	Base	130 mL	No	Yes

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	INTRAVENOUS SOLUTION SODIUM CHLORIDE 0.9 %	QS Base	250 mL	Yes	Yes
	INTRAVENOUS SOLUTION DEXTROSE 5 % IN WATER (D5W)	QS Base		No	Yes
	INTRAVENOUS SOLUTION				

Chemotherapy

CARBOplatin (PARAplatin) in dextrose 5% 250 mL chemo IVPB

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	INTRAVENOUS SOLUTION DEXTROSE 5 % IN WATER (D5W)	QS Base	250 mL	Yes	Yes
	INTRAVENOUS SOLUTION				

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Implanted Vascular Access Device
maintenance.

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solution**

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