

IP CARBOPLATIN / PEMETREXED / BEVACIZUMAB

Types: ONCOLOGY TREATMENT

Synonyms: CARB, CARBO, CARBOPLATIN, PARA, PARAPLATIN, PEMETREXED, PEM, PAM

Cycle 1	Repeat 1 time	Cycle length: 21 days
Day 1		Perform every 1 day x1
Nursing Orders		
TREATMENT CONDITIONS		
Interval: Once	Occurrences: --	
Comments:	Do NOT administer within 28 days of surgery/procedure and until the surgical wound is fully healed or within 14 days of port placement.	
Supportive Care		
cyanocobalamin injection 1,000 mcg		
Dose: 1,000 mcg	Route: intramuscular	once for 1 dose
Start: S	End: S 2:30 PM	
Instructions:	Begin week 1 of Pemetrexed dose, then every 9 weeks thereafter.	
Supportive Care		
folic acid (FOLVITE) tablet 1 mg		
Dose: 1 mg	Route: oral	daily
Start: S		
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"/>	LDH	
Interval: Once	Occurrences: --	
<input type="checkbox"/>	URIC ACID LEVEL	
Interval: Once	Occurrences: --	
<input checked="" type="checkbox"/>	URINALYSIS, AUTOMATED WITH MICROSCOPY	
Interval: Once	Occurrences: --	
Nursing Orders		
TREATMENT CONDITIONS 5		
Interval: Once	Occurrences: --	
Comments:	HOLD and notify provider if PROTEIN 2+ is detected in Urinalysis.	
Nursing Orders		
TREATMENT CONDITIONS 13		
Interval: Once	Occurrences: --	
Comments:	HOLD and notify provider if ANC LESS than 1000; Platelets LESS than 100,000; Serum Creatinine GREATER than 1.5, Total Bilirubin GREATER than 1.5	
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.

Nursing Orders

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 End: S 11:30 AM

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 End: S 11:30 AM

- 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	Base	130 mL	No	Yes

(EXCEL;NON-PVC)

Pre-Medications

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

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

Chemotherapy

PEMtrexed (ALIMTA) 500 mg/m2 in sodium chloride 0.9 % 100 mL chemo IVPB

Dose: 500 mg/m2 Route: intravenous once over 10 Minutes for 1 dose
Offset: 30 Minutes

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	PEMETREXED 500 MG INTRAVENOUS SOLUTION	Medications	500 mg/m2	Main Ingredient	Yes
	SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	QS Base	100 mL	Yes	Yes

CARBOplatin (PARAplatin) in sodium chloride 0.9 % 250 mL chemo IVPB

AUC: 6 Use AUC Route: intravenous once over 60 Minutes for 1 dose
Offset: 40 Minutes

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

Pre-Medications

acetaminophen (TYLENOL) tablet 650 mg

Dose: 650 mg Route: oral once for 1 dose
Offset: 100 Minutes

Instructions:
Pre-med for Avastin

diphenhydrAMINE (BENADRYL) tablet 25 mg

Dose: 25 mg Route: oral once for 1 dose
Offset: 100 Minutes

Instructions:
Pre-med for Avastin

dexamethasone (DECADRON) injection 10 mg

Dose: 10 mg Route: intravenous once for 1 dose
Offset: 100 Minutes

Instructions:
Pre-med for Avastin

Chemotherapy

bevacizumab (AVASTIN) 15 mg/kg in sodium chloride 0.9 % 100 mL IVPB

Dose: 15 mg/kg Route: intravenous once over 90 Minutes for 1 dose
Offset: 130 Minutes

Instructions:
For Initial Infusion, administer over 90 minutes.
If no reaction, second infusion may be given over 60 minutes. If no reaction, third and subsequent infusions may be given over 30 minutes.

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	BEVACIZUMAB 25 MG/ML INTRAVENOUS SOLUTION	Medications	15 mg/kg	Main Ingredient	Yes
	SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	QS Base	100 mL	Yes	Yes

Provider Communication

ONC PROVIDER COMMUNICATION 10

Interval: Once Occurrences: --
Comments: Please order Growth Factor to begin on Day 2, if indicated.

If patient will be discharged, consider using Neulasta Therapy Plan for Outpatient use.

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.