

## IP FLAG-IDA CONSOLIDATION

*Types:* ONCOLOGY TREATMENT

*Synonyms:* AML, ACUTE MYELOBLASTIC LEUKEMIA, LEUKEMIA

Cycle 1	Repeat 1 time	Cycle length: 7 days
<b>Day 1</b>	Perform every 1 day x1	
Provider Communication	<b>ONC PROVIDER COMMUNICATION</b> Interval: Until discontinued      Occurrences: -- Comments: Use baseline weight to calculate dose. Adjust dose for weight gains OR losses of greater than or equal to 10%.	
Labs	<b>CBC WITH PLATELET AND DIFFERENTIAL</b> Interval: Once      Occurrences: -- <b>COMPREHENSIVE METABOLIC PANEL</b> Interval: Once      Occurrences: --	
Labs	<b>MAGNESIUM LEVEL</b> Interval: --      Occurrences: --	
Supportive Care	<b>TBO-FILGRASTIM INJECTION ORDERABLE solution 5 mcg/kg (Treatment Plan)</b> Dose: 5 mcg/kg      Route: subcutaneous      once for 1 dose Start: S	
<b>Day 2</b>	Perform every 1 day x1	
Labs	<b>CBC WITH PLATELET AND DIFFERENTIAL</b> Interval: Once      Occurrences: -- <b>COMPREHENSIVE METABOLIC PANEL</b> Interval: Once      Occurrences: --	
Labs	<b>MAGNESIUM LEVEL</b> Interval: --      Occurrences: --	
Line Flush	<b>sodium chloride 0.9 % flush 20 mL</b> Dose: 20 mL      Route: intravenous      PRN Start: S	
Nursing Orders	<b>sodium chloride 0.9 % infusion 250 mL</b> Dose: 250 mL      Route: intravenous      once @ 30 mL/hr for 1 dose Start: S Instructions: To keep vein open.	
Hydration	<b>sodium chloride 0.9 % infusion</b> Dose: 100 mL/hr      Route: intravenous      continuous Start: S	

## Supportive Care

**prednisolONE acetate (PRED FORTE) 1 %  
ophthalmic suspension 2 drop**

Dose: 2 drop

Route: Both Eyes

every 4 hours while awake

Start: S

## Antiemetics

**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  
DEXTROSE 5 % IN  
WATER (D5W)  
INTRAVENOUS  
SOLUTION

Base

50 mL

Always

Yes

Base

No

Yes

## Chemotherapy

**fludarabine (FLUDARA) 30 mg/m2 in sodium  
chloride 0.9 % 100 mL chemo IVPB**

Dose: 30 mg/m2

Route: intravenous

once over 30 Minutes for 1 dose

Offset: 30 Minutes

**Instructions:**

Use within 8 hours of preparation

**Ingredients:****Name****Type****Dose****Selected****Adds Vol.**FLUDARABINE 50  
MG INTRAVENOUS  
SOLUTION

Medications

30 mg/m2

Main

Yes

Ingredient

SODIUM  
CHLORIDE 0.9 %  
INTRAVENOUS  
SOLUTION

QS Base

100 mL

Yes

Yes

DEXTROSE 5 % IN  
WATER (D5W)  
INTRAVENOUS  
SOLUTION

QS Base

100 mL

No

Yes

## Nursing Orders

**ONC NURSING COMMUNICATION 2**Interval: Until  
discontinued

Occurrences: --

Comments:

Have patient sign name as cerebellar assessment prior to each dose of  
Cytarabine.

## Nursing Orders

**ONC NURSING COMMUNICATION 71**Interval: Until  
discontinued

Occurrences: --

Comments:

Begin cytarabine 4 hours after fludarabine.

## Chemotherapy

### cytarabine PF (CYSTOSAR) 2,000 mg/m2 in dextrose 5% 250 mL chemo IVPB

Dose: 2,000 mg/m2

Route: intravenous

once over 120 Minutes for 1 dose

Offset: 5 Hours

#### Ingredients:

#### Name

#### Type

#### Dose

#### Selected

#### Adds Vol.

CYTARABINE (PF)  
100 MG/5 ML (20  
MG/ML) INJECTION  
SOLUTION

Medications

2,000  
mg/m2

Main  
Ingredient

Yes

SODIUM  
CHLORIDE 0.9 %  
INTRAVENOUS  
SOLUTION

QS Base

No

Yes

DEXTROSE 5 % IN  
WATER (D5W)  
INTRAVENOUS  
SOLUTION

QS Base

250 mL

Yes

Yes

## Supportive Care

### TBO-FILGRASTIM INJECTION ORDERABLE solution 5 mcg/kg (Treatment Plan)

Dose: 5 mcg/kg

Route: subcutaneous

once for 1 dose

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  
 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.

**Days 3,4**

Perform every 1 day x2

**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.

**Antiemetics**

**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:**

<b>Name</b>	<b>Type</b>	<b>Dose</b>	<b>Selected</b>	<b>Adds Vol.</b>
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

**Chemotherapy**

**fludarabine (FLUDARA) 30 mg/m2 in sodium  
chloride 0.9 % 100 mL chemo IVPB**

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

Offset: 30 Minutes

Instructions:

Use within 8 hours of preparation

**Ingredients:**

<b>Name</b>	<b>Type</b>	<b>Dose</b>	<b>Selected</b>	<b>Adds Vol.</b>
FLUDARABINE 50 MG INTRAVENOUS SOLUTION	Medications	30 mg/m2	Main Ingredient	Yes
SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	QS Base	100 mL	Yes	Yes
DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	QS Base	100 mL	No	Yes

**Chemotherapy**

**IDarubicin (IDAmycin) 6 mg/m2 in sodium**

**chloride 0.9% 50 mL chemo IVPB**

Dose: 6 mg/m2

Route: intravenous

once over 30 Minutes for 1 dose

Offset: 1 Hours

**Ingredients:****Name****Type****Dose****Selected****Adds Vol.**IDARUBICIN 1  
MG/ML

Medications

6 mg/m2

Main

Yes

INTRAVENOUS  
SOLUTIONSODIUM  
CHLORIDE 0.9 %

QS Base

50 mL

Yes

Yes

INTRAVENOUS  
SOLUTIONDEXTROSE 5 % IN  
WATER (D5W)

QS Base

50 mL

No

Yes

INTRAVENOUS  
SOLUTION**Nursing Orders****ONC NURSING COMMUNICATION 2**Interval: Until  
discontinued

Occurrences: --

Comments:

Have patient sign name as cerebellar assessment prior to each dose of  
Cytarabine.**Nursing Orders****ONC NURSING COMMUNICATION 71**Interval: Until  
discontinued

Occurrences: --

Comments:

Begin cytarabine 4 hours after fludarabine.

**Chemotherapy****cytarabine PF (CYSTOSAR) 2,000 mg/m2 in  
dextrose 5% 250 mL chemo IVPB**

Dose: 2,000 mg/m2

Route: intravenous

once over 120 Minutes for 1 dose

Offset: 5 Hours

**Ingredients:****Name****Type****Dose****Selected****Adds Vol.**CYTARABINE (PF)  
100 MG/5 ML (20  
MG/ML) INJECTION  
SOLUTION

Medications

2,000

mg/m2

Main

Yes

SODIUM  
CHLORIDE 0.9 %

QS Base

No

Yes

INTRAVENOUS  
SOLUTIONDEXTROSE 5 % IN  
WATER (D5W)

QS Base

250 mL

Yes

Yes

INTRAVENOUS  
SOLUTION**Supportive Care****TBO-FILGRASTIM INJECTION ORDERABLE  
solution 5 mcg/kg (Treatment Plan)**

Dose: 5 mcg/kg

Route: subcutaneous

once for 1 dose

Start: S