

## IP GDP

Types: ONCOLOGY TREATMENT

Synonyms: GDP, LYMPH, AQ, GEMZAR, GEMCI, DEXA, CISPL

Cycle 1		Repeat 1 time		Cycle length: 21 days	
Day 1		Perform every 1 day x1			
	Provider Communication				
	<b>ONC PROVIDER COMMUNICATION 5</b>				
	Interval: Once		Occurrences: --		
	Comments:		Use baseline weight to calculate dose. Adjust dose for weight gains/losses of greater than or equal to 10%.		
	Labs				
	<input checked="" type="checkbox"/> <b>CBC WITH PLATELET AND DIFFERENTIAL</b>				
	Interval: Once		Occurrences: --		
	<input checked="" type="checkbox"/> <b>COMPREHENSIVE METABOLIC PANEL</b>				
	Interval: Once		Occurrences: --		
	<input checked="" type="checkbox"/> <b>MAGNESIUM LEVEL</b>				
	Interval: Once		Occurrences: --		
	<input type="checkbox"/> <b>LDH</b>				
	Interval: Once		Occurrences: --		
	<input type="checkbox"/> <b>URIC ACID LEVEL</b>				
	Interval: Once		Occurrences: --		
	Nursing Orders				
	<b>TREATMENT CONDITIONS 7</b>				
	Interval: Until discontinued		Occurrences: --		
	Comments:		HOLD and notify provider if ANC LESS than 1000; Platelets LESS than 100,000.		
	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: 125 mL/hr		Route: intravenous		continuous
	Pre-Medications				
	<input checked="" type="checkbox"/> <b>ondansetron (ZOFTRAN) 16 mg in sodium chloride 0.9% 50 mL IVPB</b>				
	Dose: --		Route: intravenous		once over 15 Minutes for 1 dose
	Start: S		End: S 10:00 AM		
	<b>Ingredients:</b>		<b>Name</b>	<b>Type</b>	<b>Dose      Selected      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	No	No
SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	Base	50 mL	Always	Yes
DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	Base		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 MG/ML) INTRAVENOUS SOLUTION	Medications	1,000 mg/m2	Main Ingredient	Yes
SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	QS Base	250 mL	Yes	Yes
DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	QS Base		No	Yes

Chemotherapy

**CISplatin (PLATINOL) 75 mg/m2 in sodium chloride 0.9 % 500 mL chemo IVPB**

Dose: 75 mg/m2

Route: intravenous

once over 2 Hours for 1 dose

Offset: 60 Minutes

**Ingredients:**

Name	Type	Dose	Selected	Adds Vol.
CISPLATIN 1 MG/ML	Medications	75 mg/m2	Main Ingredient	Yes

INTRAVENOUS SOLUTION				
SODIUM	QS Base	500 mL	Yes	Yes
CHLORIDE 0.9 %				
INTRAVENOUS SOLUTION				
DEXTROSE 5 % IN	QS Base		No	Yes
WATER (D5W)				
INTRAVENOUS SOLUTION				

#### 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                      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

Post-Hydration

☐ **sodium chloride 0.9 % infusion 1,000 mL**

Dose: 1,000 mL                      Route: intravenous                      once @ 500 mL/hr for 1 dose  
Offset: 2 Hours

Instructions:  
Following chemotherapy.

Supportive Care

**dexamethasone (DECADRON) tablet 40 mg**

Dose: 40 mg                      Route: oral                      daily for 4 doses  
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 8**

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

**dexamethasone (DECADRON) tablet 12 mg**

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

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 MG/ML) INTRAVENOUS SOLUTION	Medications	1,000 mg/m2	Main Ingredient	Yes
	SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	QS Base	250 mL	Yes	Yes
	DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	QS Base		No	Yes