

IP INOTUZUMAB OZOGAMICIN INDUCTION

Types: ONCOLOGY TREATMENT

Synonyms: BESPONSA, INDUCTION, BESPONSA INDUCTION

Cycle 1	Repeat 1 time	Cycle length: 21 days
Day 1		Perform every 1 day x1
Labs		
	CBC WITH PLATELET AND DIFFERENTIAL Interval: Once Occurrences: --	
	COMPREHENSIVE METABOLIC PANEL Interval: Once Occurrences: --	
Labs		
	MAGNESIUM LEVEL Interval: -- Occurrences: --	
Line Flush		
	sodium chloride 0.9 % flush 20 mL Dose: 20 mL Route: intravenous PRN Start: S	
Hydration		
	sodium chloride 0.9 % infusion Dose: 100 mL/hr Route: intravenous continuous 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.	
Pre-Medications		
	acetaminophen (TYLENOL) tablet 650 mg Dose: 650 mg Route: oral once for 1 dose Start: S Instructions: Administer 30 minutes prior to chemotherapy.	
Pre-Medications		
	diphenhydramine (BENADRYL) tablet 25 mg Dose: 25 mg Route: oral once for 1 dose Start: S Instructions: Administer 30 minutes prior to chemotherapy.	
Pre-Medications		
	hydrocortisone sodium succinate (Solu-CORTEF) injection 100 mg Dose: 100 mg Route: intravenous once for 1 dose Instructions: Administer via slow IV push 30 minutes prior to chemotherapy.	
Chemotherapy		
	inotuzumab ozogamicin (BESPONSA) 0.8 mg/m² in sodium chloride 0.9% 50 mL IVPB (RESTRICTED) Dose: 0.8 mg/m ² Route: intravenous once over 1 Hours for 1 dose Offset: 30 Minutes	

Instructions:

Do not mix with or administer as an infusion with other drugs. If refrigerated, allow admixtures to warm to room temperature for approximately 1 hour prior to administration.

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	INOTUZUMAB	Medications	0.8	Main	Yes
	OZOGAMICIN 0.9 MG(0.25 MG/ML INITIAL CONCENTRATION) IV SOLN		mg/m2	Ingredient	
	SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	QS Base	50 mL	Yes	Yes

Nursing Orders

ONC NURSING COMMUNICATION 2

Interval: Once

Occurrences: --

Comments:

Observe for symptoms of infusion reaction during and for at least 1 hour after the end of the infusion.

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

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

Labs

CBC WITH PLATELET AND DIFFERENTIAL

Interval: Once Occurrences: --

COMPREHENSIVE METABOLIC PANEL

Interval: Once Occurrences: --

Labs

MAGNESIUM LEVEL

Interval: -- Occurrences: --

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

acetaminophen (TYLENOL) tablet 650 mg

Dose: 650 mg Route: oral once for 1 dose

Start: S
Instructions:
Administer 30 minutes prior to chemotherapy.

Pre-Medications

diphenhydramine (BENADRYL) tablet 25 mg

Dose: 25 mg Route: oral once for 1 dose

Start: S
Instructions:
Administer 30 minutes prior to chemotherapy.

Pre-Medications

hydrocortisone sodium succinate (Solu-CORTEF) injection 100 mg

Dose: 100 mg Route: intravenous once for 1 dose

Instructions:
Administer via slow IV push 30 minutes prior to
chemotherapy.

Chemotherapy

inotuzumab ozogamicin (BESPO NSA) 0.5 mg/m² in sodium chloride 0.9% 50 mL IVPB (RESTRICTED)

Dose: 0.5 mg/m² Route: intravenous once over 1 Hours for 1 dose
Offset: 30 Minutes

Instructions:
Do not mix with or administer as an infusion
with other drugs. If refrigerated, allow
admixture to warm to room temperature for
approximately 1 hour prior to administration.

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	INOTUZUMAB	Medications	0.5	Main	Yes
	OZOGAMICIN 0.9 MG(0.25 MG/ML		mg/m ²	Ingredient	
	INITIAL				

CONCENTRATION)
IV SOLN
SODIUM QS Base 50 mL Yes Yes
CHLORIDE 0.9 %
INTRAVENOUS
SOLUTION

Nursing Orders

ONC NURSING COMMUNICATION 2

Interval: Once

Occurrences: --

Comments:

Observe for symptoms of infusion reaction during and for at least 1 hour after the end of the infusion.

Day 15

Perform every 1 day x1

Labs

CBC WITH PLATELET AND DIFFERENTIAL

Interval: Once

Occurrences: --

COMPREHENSIVE METABOLIC PANEL

Interval: Once

Occurrences: --

Labs

MAGNESIUM LEVEL

Interval: --

Occurrences: --

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

acetaminophen (TYLENOL) tablet 650 mg

Dose: 650 mg

Route: oral

once for 1 dose

Start: S

Instructions:

Administer 30 minutes prior to chemotherapy.

Pre-Medications

diphenhydramine (BENADRYL) tablet 25 mg

Dose: 25 mg

Route: oral

once for 1 dose

Start: S

Instructions:

Administer 30 minutes prior to chemotherapy.

Pre-Medications

hydrocortisone sodium succinate (Solu-CORTEF) injection 100 mg

Dose: 100 mg

Route: intravenous

once for 1 dose

Instructions:

Administer via slow IV push 30 minutes prior to chemotherapy.

Chemotherapy

inotuzumab ozogamicin (BESPO NSA) 0.5 mg/m2 in sodium chloride 0.9% 50 mL IVPB (RESTRICTED)

Dose: 0.5 mg/m2

Route: intravenous

once over 1 Hours for 1 dose

Offset: 30 Minutes

Instructions:

Do not mix with or administer as an infusion with other drugs. If refrigerated, allow admixtures to warm to room temperature for approximately 1 hour prior to administration.

Ingredients:

Name	Type	Dose	Selected	Adds Vol.
INOTUZUMAB	Medications	0.5	Main	Yes
OZOGAMICIN 0.9 MG(0.25 MG/ML INITIAL CONCENTRATION) IV SOLN		mg/m2	Ingredient	
SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	QS Base	50 mL	Yes	Yes

Nursing Orders

ONC NURSING COMMUNICATION 2

Interval: Once

Occurrences: --

Comments:

Observe for symptoms of infusion reaction during and for at least 1 hour after the end of the infusion.