

IP NAB-PACLITAXEL / GEMCITABINE (DOSE-REDUCED) (EVERY 28 DAYS)

Types: ONCOLOGY TREATMENT

Synonyms: ABRAXANE, NAB-PACLITAXEL, NAP, ABE, BRAX, PANCREATIC, GEM, GEMCIT, GEMZAR, GEMCITABINE

Cycle 1	Repeat 1 time	Cycle length: 28 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"/>	CANCER ANTIGEN 19-9	
	Interval: Once	Occurrences: --
<input type="checkbox"/>	LDH	
	Interval: Once	Occurrences: --
<input type="checkbox"/>	URIC ACID LEVEL	
	Interval: Once	Occurrences: --
Nursing Orders		
	TREATMENT CONDITIONS 7	
	Interval: Once	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.
Pre-Medications		
<input type="radio"/>	ondansetron (ZOFTRAN) 4 mg/2 mL injection 8 mg	
	Dose: 8 mg	Route: intravenous once for 1 dose
	Start: S	End: S 11:15 AM
<input type="radio"/>	ondansetron (ZOFTRAN) tablet 16 mg	
	Dose: 16 mg	Route: oral once for 1 dose
	Start: S	
<input checked="" type="radio"/>	ondansetron (ZOFTRAN) 4 mg/2 mL 16 mg in dextrose 5% 50 mL IVPB	

Dose: 16 mg
Start: S
Route: intravenous
End: S 11:00 AM
once over 15 Minutes for 1 dose

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	ONDANSETRON HCL (PF) 4 MG/2 ML INJECTION SOLUTION	Medications	16 mg	Main Ingredient	No
	DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	Base	50 mL	Always	Yes

Supportive Care

LORAZepam (ATIVAN) injection 1 mg

Dose: 1 mg
Start: S
Route: intravenous
PRN

LORAZepam (ATIVAN) tablet 1 mg

Dose: 1 mg
Start: S
Route: oral
PRN

Supportive Care

promethazine (PHENERGAN) injection 12.5 mg

Dose: 12.5 mg
Start: S
Route: injection
every 6 hours PRN

Chemotherapy

NAB-PAClitaxel (ABRAXANE) chemo infusion 100 mg/m2 (Treatment Plan)

Dose: 100 mg/m2
Route: intravenous
once over 30 Minutes for 1 dose
Offset: 30 Minutes

gemcitabine (GEMZAR) 675 mg/m2 in sodium chloride 0.9 % 250 mL chemo IVPB

Dose: 675 mg/m2
Route: intravenous
once over 30 Minutes for 1 dose
Offset: 1 Hours

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	GEMCITABINE 200 MG/5.26 ML (38 MG/ML) INTRAVENOUS SOLUTION	Medications	675 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

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
Comments:

Occurrences: --

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.

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 8,15

Perform every 7 days x2

Labs

COMPREHENSIVE METABOLIC PANEL

Interval: Once Occurrences: --

CBC WITH PLATELET AND DIFFERENTIAL

Interval: Once Occurrences: --

MAGNESIUM LEVEL

Interval: Once Occurrences: --

CANCER ANTIGEN 19-9

Interval: Once Occurrences: --

LDH

Interval: Once Occurrences: --

URIC ACID LEVEL

Interval: Once Occurrences: --

Nursing Orders

TREATMENT CONDITIONS 7

Interval: Once Occurrences: --

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

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

ondansetron (ZOFRAN) 4 mg/2 mL injection 8 mg

Dose: 8 mg Route: intravenous once for 1 dose
 Start: S End: S 11:15 AM

ondansetron (ZOFRAN) tablet 16 mg

Dose: 16 mg Route: oral once for 1 dose
 Start: S

ondansetron (ZOFRAN) 4 mg/2 mL 16 mg in dextrose 5% 50 mL IVPB

Dose: 16 mg Route: intravenous once over 15 Minutes for 1 dose
 Start: S End: S 11:00 AM

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	ONDANSETRON HCL (PF) 4 MG/2 ML INJECTION SOLUTION	Medications	16 mg	Main Ingredient	No
	DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	Base	50 mL	Always	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

Supportive Care

promethazine (PHENERGAN) injection 12.5 mg

Dose: 12.5 mg Route: injection every 6 hours PRN
 Start: S

Chemotherapy

NAB-PACLitaxel (ABRAXANE) chemo infusion 100 mg/m2 (Treatment Plan)

Dose: 100 mg/m2 Route: intravenous once over 30 Minutes for 1 dose
 Offset: 30 Minutes

gemcitabine (GEMZAR) 675 mg/m2 in sodium chloride 0.9 % 250 mL chemo IVPB

Dose: 675 mg/m2 Route: intravenous once over 30 Minutes for 1 dose
 Offset: 1 Hours

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	GEMCITABINE 200 MG/5.26 ML (38 MG/ML) INTRAVENOUS SOLUTION	Medications	675 mg/m2	Main Ingredient	Yes
	SODIUM	QS Base	250 mL	Yes	Yes

CHLORIDE 0.9 %
INTRAVENOUS
SOLUTION
DEXTROSE 5 % IN QS Base
WATER (D5W)
INTRAVENOUS
SOLUTION

No

Yes