IP O-FC (CYCLE 1 ONLY)

Types: ONCOLOGY TREATMENT

Synonyms: OFATUM, ARZE, AREZ, CLL, CHRONIC, LYMPH, LEUKE

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Cycle		Repeat 1	time	Cycle length: 28 days					
	Day 1			Perform every 1 day x1					
	Provider Communication ONC PROVIDER COMMUNICATION 5								
	Interval: Once Occurrences:								
		Comments:	Use baseline weight to calculate dose. Adjust dose for weight						
			gains/losses of greater than or equal to 10%.						
	Labs	Labs							
		☑ CBC WITH PLATELET AND DIFFERENTIAL							
		Interval: Once	Occurrences:						
			TAROLIC PANEL						
		Interval: Once							
			Occurrences:						
		☑ MAGNESIUM LEVEL							
		Interval: Once	Occurrences:						
		□ LDH							
		Interval: Once	Occurrences:						
		☐ URIC ACID LEVEL							
			Occurrences						
	Interval: Once Occurrences:								
	INUTSI	ng Orders TREATMENT CONDIT	IONS 7						
		Interval: Once	Occurrences:						
		Comments:	HOLD and notify provider if ANC LESS than 1000; Platelets LESS than						
			100,000.						
	Provi	der Communication							
	FIOVI	ONC PROVIDER COM	MUNICATION 58						
		Interval: Once	Occurrences:						
		Comments:		xan infusion, please check if a Hepatitis B and C					
				formed within the past 6 months. Hepatitis B and rush F2:11554001 drawn on ***.					
			O scrologics results. I	usii i 2.11354001 ulawii oii .					
	Line I	Flush							
		sodium chloride 0.9 %							
		Dose: 20 mL	Route: intravenous	PRN					
		Start: S							
	Nursi	ng Orders sodium chloride 0.9 %	infusion 250 ml						
		Dose: 250 mL	Route: intravenous	once @ 30 mL/hr for 1 dose					
		Start: S		0.100 @ 00 1.12 1.11 101 1 0000					
		Instructions:							
		To keep vein open.							
	Hydration sodium chloride 0.9 % infusion								
		Dose: 100 mL/hr	Route: intravenous	continuous					
		Start: S							

Pre-Medications

☑ acetaminophen (TYLENOL) tablet 1,000 mg

Dose: 1,000 mg Route: oral once for 1 dose

Start: S Instructions:

Administer 30 minutes prior to ofatumumab.

diphenhydrAMINE (BENADRYL) injection 25 ✓ ¬¬¬

」 mg

Dose: 25 mg Route: intravenous once for 1 dose

Start: S Instructions:

Administer via slow IV push 30 minutes prior to ofatumumab.

hydrocortisone sodium succinate (Solu-CORTEF) injection 400 mg

Dose: 400 mg Route: intravenous once for 1 dose

Instructions:

Administer via slow IV push 30 minutes prior to ofatumumab.

Chemotherapy

ofatumumab (ARZERRA) 300 mg in sodium

chloride 0.9 % 1,000 mL IVPB

Dose: 300 mg Route: intravenous once for 1 dose
Offset: 30 Minutes

Instructions:

Infuse per manufacturer recommended infusion instructions. Protect from light.

Do not administer until at least 30 min after

pre-medications.

Ingredients: Name Type Dose Selected Adds Vol.

OFATUMUMAB 100 Medications 300 mg Main Yes MG/5 ML Ingredient

INTRAVENOUS SOLUTION

SODIUM QS Base 985 mL Yes Yes

CHLORIDE 0.9 % 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 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.

diphenhydrAMINE (BENADRYL) injection 25

mg

Dose: 25 mg

Route: intravenous

PRN

Start: S

Start: S

fexofenadine (ALLEGRA) tablet 180 mg

Dose: 180 mg

Route: oral

PRN

famotidine (PEPCID) 20 mg/2 mL injection 20

mg **PRN** Dose: 20 mg Route: intravenous Start: S hydrocortisone sodium succinate (Solu-CORTEF) injection 100 mg Dose: 100 mg Route: intravenous PRN dexamethasone (DECADRON) injection 4 mg Route: intravenous **PRN** Dose: 4 ma 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 Dose: 20 mL **PRN** Route: intravenous Dose: 500 Units Route: intra-catheter once PRN Start: S Instructions: Concentration: 100 units/mL. Heparin flush for Implanted Vascular Access Device maintenance. Days 2,3,4 Perform every 1 day x3 **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) 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 Medications 16 mg Yes No HCL (PF) 4 MG/2 ML INJECTION SOLUTION DEXAMETHASONE Medications 12 mg Yes No 4 MG/ML INJECTION SOLUTION SODIUM Base 50 mL Always Yes CHLORIDE 0.9 % **INTRAVENOUS** SOLUTION DEXTROSE 5 % IN Base No Yes WATER (D5W) **INTRAVENOUS** SOLUTION ☐ ondansetron (ZOFRAN) tablet 16 mg Dose: 16 ma Route: oral once for 1 dose

			Start: S							
			dexamethasone (DECADRON) tablet 12 mg							
			Dose: 12 mg Start: S	Route: oral	once for 1 do	se				
			aprepitant (CINVANTI) (NON-PVC) 5% 130 mL Dose: 130 mg	VPB Route: intravenous once over 30 Minutes for 1 dose						
			Start: S Ingredients:	End: S Name	Туре	Dose	Selected	Adds Vol.		
					Medications		Main Ingredient	Yes		
					Base	130 mL	Yes	Yes		
				SODIUM CHLORIDE 0.9 % IV SOLP (EXCEL;NON-PVC)	Base	130 mL	No	Yes		
	Chem	othe	rany	(LXOLL,NON-1 VO)						
	3.10111		fludarabine (FLUDARA							
		Chemothe	chloride 0.9 % 100 mL Dose: 25 mg/m2	chemo IVPB Route: intravenous	once over 30	Minutos fo	r 1 doso			
			Dose. 25 mg/m2	noute. Intravenous	Offset: 30 Mir		i i dose			
			Ingredients:	Name FLUDARABINE 50 MG INTRAVENOUS SOLUTION	Type Medications	Dose 25 mg/m2		Adds Vol. Yes		
					QS Base		Yes	Yes		
					QS Base		No	Yes		
	Chem		erany	OCCOTION						
	0110111		cyclophosphamide (CYTOXAN) 250 mg/m2 in sodium chloride 0.9 % 100 mL chemo IVPB							
			Dose: 250 mg/m2	Route: intravenous	once over 30 Offset: 60 Mir		r 1 dose			
			Instructions: DRUG IS AN IRRITANT result in dizziness, nasa and/or nasal burning. Ingredients:							
				Name CYCLOPHOSPHAM IDE 1 GRAM INTRAVENOUS SOLUTION	Type Medications	Dose 250 mg/m2	Selected Main Ingredient	Adds Vol. 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		