IP O-FC (CYCLE 2 AND BEYOND)

Types: ONCOLOGY TREATMENT

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

Synonyms.	OIA	TOW, ATTEL, ATTEL, OLL, O	TITIOTATO, ETIVIT TI, EEOT	\L			
Cycle 2		Repeat 1	time	Cycle length: 28 days			
Day					Perform every 1 day x1		
Provider Communication ONC PROVIDER COMMUNICATION 5							
		Interval: Once	Occurrences:				
		Comments:		calculate dose. Adjust do	se for weight		
			gains/losses of greater	than or equal to 10%.			
	Labs						
	☐ CBC WITH PLATELET AND DIFFERENTIAL						
		Interval: Once	Occurrences:				
		□ COMPREHENSIVE ME					
		Interval: Once	Occurrences:				
		✓ MAGNESIUM LEVEL	Coodificinoes.				
		Interval: Once	Occurrences:				
			Occurrences				
		□ LDH	0				
		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.				
			100,000.				
	Provider Communication						
		ONC PROVIDER COM					
		Interval: Once Comments:	Occurrences: Prior to beginning Ritus	rior to beginning Rituxan infusion, please check if a Hepatitis B and C			
		serology has been performed within the past 6 months. Hepatitis B					
			C serologies results: Po	ush F2:11554001 drawn o	on ***.		
	Line F	lush					
		sodium chloride 0.9 %	flush 20 mL				
		Dose: 20 mL Start: S	Route: intravenous	PRN			
	Murein						
	Nursing Orders sodium chloride 0.9 9		infusion 250 mL	infusion 250 mL			
		Dose: 250 mL	Route: intravenous	once @ 30 mL/hr for 1 of	dose		
		Start: S Instructions:					
		To keep vein open.					
	Hydra						
		sodium chloride 0.9 % Dose: 100 mL/hr	infusion Route: intravenous	continuous			
		Start: S	nodio. Intravollous	Softiffication			

Pre-Medications

☑ acetaminophen (TYLENOL) tablet 650 mg

Dose: 650 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

Start: S Instructions:

Administer via slow IV push 30 minutes prior to

ofatumumab.

Chemotherapy

ofatumumab (ARZERRA) 1,000 mg in sodium

chloride 0.9 % 1,000 mL IVPB

Dose: 1,000 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 1 hour after

pre-medications.

Ingredients: Name Type Dose Selected Adds Vol.

OFATUMUMAB 100 Medications 1,000 mg Main Yes MG/5 ML Ingredient

INTRAVENOUS SOLUTION

SODIUM QS Base 950 mL Yes Yes

CHLORIDE 0.9 % INTRAVENOUS SOLUTION

Hematology & Oncology Hypersensitivity Reaction Standing Order

ONC NURSING COMMUNICATION 82

Interval: Until discontinued Comments:

Occurrences: --

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 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. **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 (DECA	DRON) 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	IVPB 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					
			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	
		hemothe	Ingredients:	Name FLUDARABINE 50 MG INTRAVENOUS SOLUTION	Type Medications	Dose 25 mg/m2		Adds Vol. Yes
					QS Base		Yes	Yes
				DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	QS Base		No	Yes
	Chem		erany	OCCOTION				
	0	.01.10	cyclophosphamide (C) sodium chloride 0.9 %					
			Dose: 250 mg/m2	Route: intravenous	once over 30 Offset: 60 Mir		r 1 dose	
			Instructions: DRUG IS AN IRRITANT. result in dizziness, nasal, 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