IP OFATUMUMAB (CYCLE 1 ONLY)

Types: ONCOLOGY TREATMENT

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

, ,					
Cycle 1		Repeat 1	time	Cycle length: 28 days	
Day 1					Perform every 1 day x1
	Provid	der Communication	MUNIO ATION 5		
		ONC PROVIDER COM Interval: Once			
		Comments:	Occurrences:	calculate dose. Adjust do	se for weight
		Comments.	gains/losses of greater		osc for weight
			gamenace en granier		
	Labs				
		☑ CBC WITH PLATELET	AND DIFFERENTIAL		
		Interval: Once	Occurrences:		
		✓ COMPREHENSIVE ME			
		_			
		Interval: Once	Occurrences:		
		✓ MAGNESIUM LEVEL			
		Interval: Once	Occurrences:		
		□ LDH			
		Interval: Once	Occurrences:		
		☐ URIC ACID LEVEL			
			Occurrences:		
Interval: Once Occurrences: Line Flush					
	Line i	-iusn sodium chloride 0.9 %	flush 20 ml		
		Dose: 20 mL	Route: intravenous	PRN	
		Start: S			
Nursing Orders					
		sodium chloride 0.9 %			d
		Dose: 250 mL Start: S	Route: intravenous	once @ 30 mL/hr for 1	dose
		Instructions:			
		To keep vein open.			
Provider Communication					
		ONC PROVIDER COM			
		Interval: Once Comments:	Occurrences: Prior to beginning Rituxan infusion, please check if a Hepatitis B and C		
		Comments.		ormed within the past 6 n	
			C serologies results: Pu	ush F2:11554001 drawn o	on ***.
	Pre-M	ledications			
		acetaminophen (TYLE	NOL) tablet 650 mg		
		Dose: 650 mg	Route: oral	once for 1 dose	
		Start: S			
		Instructions: Administer 30 minute	s prior to chemotherapy		
		Administer 30 minutes prior to chemotherapy. _ 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

chemotherapy.

hydrocortisone sodium succinate (Solu-CORTEF) injection 200 mg

Dose: 200 mg Route: intravenous once for 1 dose

Start: S Instructions:

Administer via slow IV push 30 minutes prior to

chemotherapy.

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

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 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

ma

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 **PRN** Route: subcutaneous Start: S Discharge Nursing Orders Dose: 20 mL Route: intravenous **PRN** 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: --MAGNESIUM LEVEL Interval: Once Occurrences: --□ LDH Interval: Once Occurrences: --**□ URIC ACID LEVEL** Interval: Once 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. diphenhydrAMINE (BENADRYL) injection 25 \checkmark mg Dose: 25 mg Route: intravenous once for 1 dose Start: S Instructions: Administer via slow IV push 30 minutes prior to chemotherapy. hydrocortisone sodium succinate (Solu-CORTEF) injection 200 mg Dose: 200 mg Route: intravenous once for 1 dose Start: S Instructions: Administer via slow IV push 30 minutes prior to chemotherapy.

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