

IP OXALIPLATIN DESENSITIZATION

Types: ONCOLOGY TREATMENT

Synonyms: OXALIPLATIN, DESENS, ELOXATIN

Cycle 1	Repeat 1 time	Cycle length: 1 day
Day 1	Perform every 1 day x1	
Nursing Orders		
ONC PROVIDER COMMUNICATION 53		
Interval: Until discontinued Occurrences: --		
Comments: All OXALlplatin desensitization protocols will start at 9 am of the treatment day. Any OXALlplatin desensitization protocol ordered after 9am will start on the following day.		
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"/> BASIC METABOLIC PANEL		
Interval: Once Occurrences: --		
<input type="checkbox"/> PULMONARY FUNCTION TEST		
Interval: Once Occurrences: --		
<input type="checkbox"/> URINALYSIS, AUTOMATED WITH MICROSCOPY		
Interval: Once Occurrences: --		
<input type="checkbox"/> TYPE AND SCREEN		
Interval: Once Occurrences: --		
Nursing Orders		
TREATMENT CONDITIONS 7		
Interval: Until discontinued Occurrences: --		
Comments: HOLD and notify provider if ANC LESS than 1000; Platelets LESS than 100,000.		
Line Flush		
dextrose 5% flush syringe 20 mL		
Dose: 20 mL Route: intravenous PRN		
Start: S		
Instructions: Administer ONLY for Oxaliplatin.		
Nursing Orders		
dextrose 5% infusion 250 mL		
Dose: 250 mL Route: intravenous once @ 30 mL/hr for 1 dose		
Start: S		
Instructions: To keep vein open for Oxaliplatin.		
Hydration		

☐ (No Medication Selected)

Dose: --

Route: intravenous

continuous

Start: S

Ingredients:

Name

Type

Dose

Selected

Adds Vol.

DEXTROSE 5 % IN

Base

1,000 mL

No

Yes

WATER (D5W)

INTRAVENOUS

SOLUTION

Provider Communication

ONC PROVIDER COMMUNICATION 52

Interval: Until
discontinued

Occurrences: --

Comments:

Total OXALlplatin dose: ***

Please manually calculate and enter in Dose 1, 2, 3, 4, and 5.

Pre-Medications

famotidine (PEPCID) injection 20 mg

Dose: 20 mg

Route: intravenous

once for 1 dose

Start: S 9:00 AM

Instructions:

Administer 30 minutes prior to FIRST

OXALlplatin dose on Day 1.

ondansetron (ZOFTRAN) 16 mg, dexamethasone

(DECADRON) 20 mg in dextrose 5% 50 mL

IVPB

Dose: --

Route: intravenous

once over 15 Minutes for 1 dose

Start: S 9:00 AM

End: S 11:42 PM

Instructions:

Administer 30 minutes prior to FIRST

OXALlplatin dose on Day 1.

Ingredients:

Name

Type

Dose

Selected

Adds Vol.

ONDANSETRON

Medications

16 mg

Yes

No

HCL 2 MG/ML

INTRAVENOUS

SOLUTION

DEXAMETHASONE Medications	20 mg	Yes	No
4 MG/ML INJECTION SOLUTION			
SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	Base 50 mL	No	Yes
DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	Base 50 mL	Yes	Yes

diphenhydramine (BENADRYL) injection 25 mg

Dose: 25 mg Route: intravenous once for 1 dose
 Start: S 9:00 AM
 Instructions:
 Administer 30 minutes prior to FIRST OXALIPlatin dose on Day 1.

Chemotherapy

OXALIPlatin (ELOXATIN) in dextrose 5% 100 mL chemo IVPB

Dose: -- Route: intravenous once over 1 Hours for 1 dose
 Offset: 30 Minutes

Instructions:
 Bag 1 = 1/10000 of the dose
 Irritant, avoid extravasation. Flush line with D5W before and after oxaliplatin infusion.

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	OXALIPLATIN 100 MG/20 ML INTRAVENOUS SOLUTION	Medications		Main Ingredient	Yes
	DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	QS Base	100 mL	Yes	Yes

OXALIPlatin (ELOXATIN) in dextrose 5% 100 mL chemo IVPB

Dose: -- Route: intravenous once over 1 Hours for 1 dose
 Offset: 90 Minutes

Instructions:
 Bag 2 = 1/1000 of the dose
 Irritant, avoid extravasation. Flush line with D5W before and after oxaliplatin infusion.

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	OXALIPLATIN 100 MG/20 ML INTRAVENOUS SOLUTION	Medications		Main Ingredient	Yes
	DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	QS Base	100 mL	Yes	Yes

OXALIPlatin (ELOXATIN) in dextrose 5% 100 mL chemo IVPB

Dose: -- Route: intravenous once over 1 Hours for 1 dose
 Offset: 150 Minutes

Instructions:
 Bag 3 = 1/100 of the dose

Irritant, avoid extravasation. Flush line with D5W before and after oxaliplatin infusion.

Ingredients:

Name

Type

Dose

Selected
Main
Ingredient

Adds Vol.
Yes

OXALIPLATIN 100
MG/20 ML
INTRAVENOUS
SOLUTION
DEXTROSE 5 % IN
WATER (D5W)
INTRAVENOUS
SOLUTION

Medications

QS Base

100 mL

Yes

Yes

**OXALIplatin (ELOXATIN) in dextrose 5% 100
mL chemo IVPB**

Dose: --

Route: intravenous

once over 1 Hours for 1 dose

Offset: 210 Minutes

Instructions:

Bag 4 = 1/10 of the dose

Irritant, avoid extravasation. Flush line with
D5W before and after oxaliplatin infusion.

Ingredients:

Name

Type

Dose

Selected
Main
Ingredient

Adds Vol.
Yes

OXALIPLATIN 100
MG/20 ML
INTRAVENOUS
SOLUTION
DEXTROSE 5 % IN
WATER (D5W)
INTRAVENOUS
SOLUTION

Medications

QS Base

100 mL

Yes

Yes

Nursing Orders

**ONC CARBO DESENSITIZATION AFTER DOSE
3**

Interval: Until
discontinued

Occurrences: --

Comments:

After completion of dose 4 of OXALlplatin and if no hypersensitivity
reactions noted, please call pharmacy for dose 5 to be delivered.

Pre-Medications

ondansetron (ZOFTRAN) 8 mg in dextrose 5% 50 mL IVPB

Dose: -- Route: intravenous once over 15 Minutes for 1 dose
Offset: 270 Minutes

Instructions:
Administer 30 minutes prior to LAST (Bag 5)
OXALIplatin dose on Day 1.

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	ONDANSETRON HCL 2 MG/ML INTRAVENOUS SOLUTION	Medications	8 mg	Yes	No
	DEXAMETHASONE 4 MG/ML INJECTION SOLUTION	Medications	20 mg	No	No
	SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	Base	50 mL	No	Yes
	DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	Base	50 mL	Yes	Yes

diphenhydramine (BENADRYL) injection 25 mg

Dose: 25 mg Route: intravenous once for 1 dose
Offset: 270 Minutes

Instructions:
Administer 30 minutes prior to LAST (Bag 5)
OXALIplatin dose on Day 1.

hydrocortisone sodium succinate (Solu-CORTEF) injection 100 mg

Dose: 100 mg Route: intravenous once for 1 dose
Offset: 270 Minutes

Instructions:
Administer 30 minutes prior to LAST (Bag 5)
OXALIplatin dose on Day 1.

Chemotherapy

OXALIplatin (ELOXATIN) in dextrose 5% 500 mL chemo IVPB

Dose: -- Route: intravenous once over 4 Hours for 1 dose
Offset: 300 Minutes

Instructions:
Bag 5 = Total dose minus the sum of the four previous bags.
Irritant, avoid extravasation. Flush line with D5W before and after oxaliplatin infusion.

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	OXALIPLATIN 100 MG/20 ML INTRAVENOUS SOLUTION	Medications		Main Ingredient	Yes
	DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	QS Base	500 mL	Yes	Yes

Hematology & Oncology Hypersensitivity Reaction Standing Order

ONC NURSING COMMUNICATION 82

Interval: Until Occurrences: --

discontinued
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

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

☒ **dextrose 5% flush syringe 20 mL**

Dose: 20 mL Route: intravenous PRN
 Start: S
 Instructions:
 Administer ONLY for Oxaliplatin.

☒ **HEparin, porcine 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.