

## IP PACLITAXEL 80 (EVERY 7 DAYS)

Types: ONCOLOGY TREATMENT

Synonyms: PAX, PACLITAXEL, TAXOL, TACK, TAC, GYN, GYNECOLOGIC, MALIGNANCY

Cycle 1	Repeat 1 time	Cycle length: 7 days
Day 1	Perform every 1 day x1	
Labs		
<input checked="" type="checkbox"/> <b>COMPREHENSIVE METABOLIC PANEL</b>	Interval: Once	Occurrences: --
<input checked="" type="checkbox"/> <b>CBC WITH PLATELET AND DIFFERENTIAL</b>	Interval: Once	Occurrences: --
<input checked="" type="checkbox"/> <b>MAGNESIUM LEVEL</b>	Interval: Once	Occurrences: --
<input type="checkbox"/> <b>CANCER ANTIGEN 125</b>	Interval: Once	Occurrences: --
<input type="checkbox"/> <b>LDH</b>	Interval: Once	Occurrences: --
<input type="checkbox"/> <b>URIC ACID LEVEL</b>	Interval: Once	Occurrences: --
Nursing Orders		
<b>TREATMENT CONDITIONS 13</b>	Interval: Until discontinued	Occurrences: --
Comments:	HOLD and notify provider if ANC LESS than 1000; Platelets LESS than 100,000; Serum Creatinine GREATER than 1.5, Total Bilirubin GREATER than 1.5	
Line Flush		
<b>sodium chloride 0.9 % flush 20 mL</b>	Dose: 20 mL	Route: intravenous PRN
Start: S		
Nursing Orders		
<b>sodium chloride 0.9 % infusion 250 mL</b>	Dose: 250 mL	Route: intravenous once @ 30 mL/hr for 1 dose
Start: S		
Instructions:	To keep vein open.	
Pre-Medications		
<b>ondansetron (ZOFTRAN) 8 mg, dexamethasone (DECADRON) 20 mg in sodium chloride 0.9 % 50 mL IVPB</b>	Dose: --	Route: intravenous once over 15 Minutes for 1 dose
Start: S	End: S 11:30 AM	
<b>Ingredients:</b>	<b>Name</b>	<b>Type Dose Selected Adds Vol.</b>
	ONDANSETRON HCL (PF) 4 MG/2 ML INJECTION SOLUTION	Medications 8 mg Yes No
	DEXAMETHASONE 4 MG/ML	Medications 20 mg Yes No

INJECTION SOLUTION SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	Base	50 mL	Always	Yes
DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	Base		No	Yes

#### Pre-Medications

☒ **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.

☐ **diphenhydrAMINE (BENADRYL) 50 mg in sodium chloride 0.9% 50 mL IVPB**

Dose: 50 mg      Route: intravenous      once over 15 Minutes for 1 dose

Start: S

End: S 11:45 AM

Instructions:

Administer 30 minutes prior to chemotherapy.

**Ingredients:**

Name	Type	Dose	Selected	Adds Vol.
DIPHENHYDRAMIN E 50 MG/ML INJECTION SOLUTION	Medications	50 mg	Main Ingredient	No
SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	Base	50 mL	Yes	Yes
DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	Base	50 mL	No	Yes

☐ **diphenhydrAMINE (BENADRYL) tablet 25 mg**

Dose: 25 mg      Route: oral      once for 1 dose

Offset: 0 Hours

Instructions:

Administer 30 minutes prior to chemotherapy.

☐ **diphenhydrAMINE (BENADRYL) tablet 50 mg**

Dose: 50 mg      Route: oral      once for 1 dose

Offset: 0 Hours

Instructions:

Administer 30 minutes prior to chemotherapy.

☒ **famotidine (PEPCID) injection 20 mg**

Dose: 20 mg      Route: intravenous      once for 1 dose

Offset: 0 Hours

Instructions:

Administer 30 minutes prior to chemotherapy.

☐ **famotidine (PEPCID) tablet 20 mg**

Dose: 20 mg      Route: oral      once for 1 dose

Offset: 0 Hours

Instructions:

Administer 30 minutes prior to chemotherapy.

☐ **acetaminophen (TYLENOL) tablet 650 mg**

Dose: 650 mg

Route: oral

once for 1 dose

Offset: 0 Hours

Instructions:

Administer 30 minutes prior to chemotherapy.

Pre-Medications

☐ **LORazepam (ATIVAN) tablet 1 mg**

Dose: 1 mg

Route: oral

once for 1 dose

Start: S

Chemotherapy

**PACLitaxel (TAXOL) 80 mg/m<sup>2</sup> in sodium chloride (NON-PVC) 0.9 % 250 mL chemo IVPB**

Dose: 80 mg/m<sup>2</sup>

Route: intravenous

once over 1 Hours for 1 dose

Offset: 30 Minutes

Instructions:

Administer through a 0.22 micron filter and non-PVC tubing set.

**Ingredients:**

**Name**

**Type**

**Dose**

**Selected**

**Adds Vol.**

PACLITAXEL 6  
MG/ML

Medications

80 mg/m<sup>2</sup>

Main

Yes

CONCENTRATE, IN  
TRAVENOUS

SODIUM  
CHLORIDE 0.9 % IV

QS Base

250 mL

Yes

Yes

SOLP  
(EXCEL; NON-PVC)

DEXTROSE 5 % IN  
WATER (D5W) IV

QS Base

No

Yes

SOLP (EXCEL;  
NON-PVC)

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

Occurrences: --

Comments:

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  
Start: S

Route: intravenous PRN

#### fexofenadine (ALLEGRA) tablet 180 mg

Dose: 180 mg  
Start: S

Route: oral PRN

#### famotidine (PEPCID) 20 mg/2 mL injection 20 mg

Dose: 20 mg  
Start: S

Route: intravenous PRN

#### 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.