

IP PENTOSTATIN

Types: ONCOLOGY TREATMENT

Synonyms: PENTO, HAIRY, CELL, LEUKE, NIPENT, EVERY OTHER, GVHD

Cycle 1	Repeat 1 time	Cycle length: 14 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				
	<input checked="" type="checkbox"/> CBC WITH PLATELET AND DIFFERENTIAL				
	Interval: Once	Occurrences: --			
	<input checked="" type="checkbox"/> COMPREHENSIVE METABOLIC PANEL				
	Interval: Once	Occurrences: --			
	<input checked="" type="checkbox"/> MAGNESIUM LEVEL				
	Interval: Once	Occurrences: --			
	<input type="checkbox"/> LDH				
	Interval: Once	Occurrences: --			
	<input type="checkbox"/> URIC ACID LEVEL				
	Interval: Once	Occurrences: --			
Line Flush					
sodium chloride 0.9 % flush 20 mL					
Dose: 20 mL	Route: intravenous	PRN			
Start: S					
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.				
Hydration					
sodium chloride 0.9 % infusion					
Dose: 100 mL/hr	Route: intravenous	continuous			
Start: S					
Chemotherapy					
pentostatin (NIPENT) 4 mg/m2 in sodium chloride 0.9 % 50 mL chemo IVPB					
Dose: 4 mg/m2	Route: intravenous	once over 30 Minutes for 1 dose			
		Offset: 30 Minutes			
Instructions:	Drug is an irritant. Observe carefully for signs of local irritation or infiltration. Apply ice if infiltration occurs.				
Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	PENTOSTATIN 10 MG INTRAVENOUS SOLUTION	Medications	4 mg/m2	Main Ingredient	Yes
	SODIUM	Base	50 mL	Yes	Yes

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

Supportive Care

sulfamethoxazole-trimethoprim (BACTRIM SS)

400-80 mg per tablet 1 tablet

Dose: 1 tablet	Route: oral	daily for 14 doses
Start: S		

Supportive Care

acyclovir (ZOVIRAX) tablet 800 mg

Dose: 800 mg	Route: oral	2 times daily for 28 doses
Start: S		

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

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

☒ 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.