IP RAMUCIRUMAB / DOCETAXEL (EVERY 21 DAYS)

Types: ONCOLOGY TREATMENT

Synonyms: DOCE, DOCETAXEL, TAXOTERE, TAX, TAXO, RAMU, CYRAMZA, NSCLC, NON SQUAMOUS CELL LUNG CANCER, PSY, CYR, SIGH

Cycle 1		Repeat 1	time	Cycle length: 21 days		
Day 1		Tiepear T	une	Perform every		
	Nursin	ig Orders				
		TREATMENT CONDIT Interval: Until discontinued Comments:	Occurrences: Do NOT administer wit	hin 28 days of surgery/pro healed or within 14 days o		
	abs					
	-400	✓ URINALYSIS, AUTOM MICROSCOPY Interval: Once	ATED WITH Occurrences:			
		CBC WITH PLATELET	AND DIFFERENTIAL			
		Interval: Once	Occurrences:			
		COMPREHENSIVE ME	TABOLIC PANEL			
		Interval: Once	Occurrences:			
		☑ MAGNESIUM LEVEL				
		Interval: Once	Occurrences:			
N	Nursin	g Orders				
		TREATMENT CONDIT Interval: Until discontinued Comments:	Occurrences:	der if PROTEIN 2+ is dete	ected in Urine.	
N	Vursin	g Orders				
		TREATMENT CONDIT Interval: Until discontinued Comments:	Occurrences:	der if ANC LESS than 100	00; Platelets LESS than	
Ľ	ine F	lush				
		sodium chloride 0.9 % Dose: 20 mL Start: S	flush 20 mL Route: intravenous	PRN		
Ν	Nursin	g Orders				
		sodium chloride 0.9 % Dose: 250 mL Start: S Instructions: To keep vein open.	a infusion 250 mL Route: intravenous	once @ 30 mL/hr for 1	dose	
F	Pre-M	edications				
		✓ diphenhydrAMINE (BE mg Dose: 25 mg Start: S	ENADRYL) injection 25 Route: intravenous	once for 1 dose		

	Instructions: Administer via slow IV chemotherapy.	push 30 minutes prior to)			
	_ diphenhydrAMINE (BENADRYL) 50 mg in					
	Sodium chloride 0.9 % Dose: 50 mg Start: S Instructions:	50 mL IVPB Route: intravenous End: S 11:45 AM	once over 15	Minutes fo	or 1 dose	
	Administer 30 minutes Ingredients:	s prior to chemotherapy. Name DIPHENHYDRAMIN E 50 MG/ML INJECTION SOLUTION	Type I Medications	Dose 50 mg	Selected Main Ingredient	Adds Vol. No
		SOLUTION SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	Base	50 mL	Yes	Yes
		DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	Base	50 mL	No	Yes
	☐ diphenhydrAMINE (BE					
	Dose: 25 mg	Route: oral	once for 1 do Offset: 0 Hou			
	Instructions: Administer 30 minutes	s prior to chemotherapy.				
	🗌 diphenhydrAMINE (BE	NADRYL) tablet 50 mg				
	Dose: 50 mg	Route: oral	once for 1 do Offset: 0 Hou			
	Instructions: Administer 30 minutes	s prior to chemotherapy.				
	_ famotidine (PEPCID) 2	0 mg/2 mL injection 20				
	mg	Route: intravenous	once for 1 do			
	Dose: 20 mg	Roule. Intravenous	Offset: 0 Hou			
	Instructions: Administer 30 minutes	s prior to chemotherapy.				
	famotidine (PEPCID) ta	ablet 20 mg				
	Dose: 20 mg	Route: oral	once for 1 do Offset: 0 Hou			
	Instructions: Administer 30 minutes	s prior to chemotherapy.				
	✓ acetaminophen (TYLE					
	Dose: 650 mg	Route: oral	once for 1 do Offset: 0 Hou			
	Instructions: Administer 30 minutes	s prior to chemotherapy.				
Pre-N	edications					
	ondansetron (ZOFRAN ☑ (DECADRON) 20 mg in 50 mL IVPB	l) 16 mg, dexamethason n sodium chloride 0.9%	ne			
	Dose:	Route: intravenous	once over 15	Minutes for	or 1 dose	
	Start: S Ingredients:	End: S 11:30 AM Name	Туре	Dose	Selected	Adds Vol.
	ingreatents.	ONDANSETRON HCL (PF) 4 MG/2	Medications		Yes	No

		ML INJECTION SOLUTION DEXAMETHASONE 4 MG/ML	Medications	20 mg	Yes	No	
		INJECTION SOLUTION SODIUM CHLORIDE 0.9 % INTRAVENOUS	Base	50 mL	Always	Yes	
		SOLUTION DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	Base		No	Yes	
	□ ondansetron (ZOFRAN) tablet 16 mg						
	Dose: 16 mg Start: S	Route: oral End: S 11:30 AM	once for 1 do	se			
	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 Start: S	Route: intravenous End: S	once over 30	Minutes fo	r 1 dose		
	Ingredients:	Name APREPITANT 7.2 MG/ML INTRAVENOUS EMULSION	Type Medications	Dose 130 mg	Selected Main Ingredient	Adds Vol. Yes	
		DEXTROSE 5 % IN WATER (D5W) IV SOLP (EXCEL; NON-PVC)	Base	130 mL	Yes	Yes	
		SODIUM CHLORIDE 0.9 % IV SOLP (EXCEL;NON-PVC)	Base /	130 mL	No	Yes	
Chem	notherapy						
	ramucirumab (CYRAM chloride 0.9 % 250 mL		1				
	Dose: 10 mg/kg	Route: intravenous	once over 60 Offset: 30 Mir		r 1 dose		
	Instructions: Use of a 0.22 micron p recommended.	protein sparing filter is					
	Ingredients:	Name RAMUCIRUMAB 10 MG/ML INTRAVENOUS SOLUTION	Type Medications	Dose 10 mg/kg	Selected Main Ingredient	Adds Vol. Yes	
		SOLUTION SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	QS Base	250 mL	Yes	Yes	
	DOCEtaxel (TAXOTER) chloride (NON-PVC) 0.9 Dose: 75 mg/m2			Minutes fo	r 1 dose		
	Ū.		Offset: 90 Mir				
	Instructions:						

	Administer through non-DEHP tubing; Use within 4 hours of preparation; Protect from light.							
	Ingredients:	Name DOCETAXEL 80 MG/4 ML (20 MG/ML) INTRAVENOUS SOLUTION	Type Medications	Dose 75 mg/m2		Adds Vol. Yes		
		SODIUM CHLORIDE 0.9 % IV SOLP	QS Base /	250 mL	Yes	Yes		
		(EXCEL;NON-PVC) DEXTROSE 5 % IN WATER (D5W) IV SOLP (EXCEL;	QS Base	250 mL	No	Yes		
Hema	atology & Oncology Hyperser	NON-PVC) Isitivity Reaction Standing	Order					
	ONC NURSING COMM	UNICATION 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 COMM							
	Interval: Until	Occurrences:						
	discontinued 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. 						
		 Notify the OLTT team and treating physician infinediately. Place the patient on continuous monitoring. Obtain vital signs. 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 Hydrocorti to Hydrocortisone, pleas intravenous), Fexofenad	e administer [Dexametha	sone 4 mg			
		intravenous once. 8. If no improvement after (Severe).	er 15 minutes,	advance le	evel of care	e to Grade 3		

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:	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 (E	BENADRYL) injection 25				
	mg Dose: 25 mg Start: S	Route: intravenous	PRN			
	fexofenadine (ALLE					
	Dose: 180 mg Start: S	Route: oral	PRN			
	,	20 mg/2 mL injection 20)			
	mg Dose: 20 mg Start: S	Route: intravenous	PRN			
	hydrocortisone sodi (Solu-CORTEF) injec					
	Dose: 100 mg	Route: intravenous	PRN			
	dexamethasone (DE Dose: 4 mg Start: S	CADRON) injection 4 mg Route: intravenous	PRN			
	epINEPHrine (ADRE	NALIN) 1 mg/10 mL ADU	LT			
	injection syringe 0.3 Dose: 0.3 mg Start: S	mg Route: subcutaneous	PRN			
Disch	arge Nursing Orders					
	🔽 sodium chloride 0.9	% flush 20 mL				
	Dose: 20 mL	Route: intravenous	PRN			
	☑ HEParin, porcine (PI	F) injection 500 Units				
	Dose: 500 Units Start: S Instructions:	Route: intra-catheter	once PRN			
	Concentration: 100	units/mL. Heparin flush fo	r			

