

IP TOPOTECAN / BEVACIZUMAB (EVERY 7 DAYS)

Types: ONCOLOGY TREATMENT

Synonyms: TOT, TOPOTECAN, TOPETECAN, HYCAMTIN, HI, TWO , GYN, GYNECOLOGIC, MALIGNANCY, AVAST, BEVA, VAST

Cycle 1	Repeat 1 time	Cycle length: 28 days
Day 1	Perform every 1 day x1	
Nursing Orders		
TREATMENT CONDITIONS		
Interval: Once Occurrences: --		
Comments: Do NOT administer within 28 days of surgery/procedure and until the surgical wound is fully healed or within 14 days of port placement.		
Labs		
☒ COMPREHENSIVE METABOLIC PANEL		
Interval: Once Occurrences: --		
☒ CBC WITH PLATELET AND DIFFERENTIAL		
Interval: Once Occurrences: --		
☒ MAGNESIUM LEVEL		
Interval: Once Occurrences: --		
☒ URINALYSIS, AUTOMATED WITH MICROSCOPY		
Interval: Once Occurrences: --		
☐ CANCER ANTIGEN 125		
Interval: Once Occurrences: --		
Nursing Orders		
TREATMENT CONDITIONS 5		
Interval: Once Occurrences: --		
Comments: HOLD and notify provider if PROTEIN 2+ is detected in Urinalysis.		
Nursing Orders		
TREATMENT CONDITIONS 13		
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		
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.		
Pre-Medications		

☒ **ondansetron (ZOFTRAN) injection 8 mg**

Dose: 8 mg Route: intravenous once for 1 dose
Start: S

☐ **ondansetron (ZOFTRAN) tablet 16 mg**

Dose: 16 mg Route: oral once for 1 dose
Start: S

☐ **ondansetron (ZOFTRAN) 16 mg in dextrose 5% 50 mL IVPB**

Dose: 16 mg Route: intravenous once over 15 Minutes for 1 dose
Start: S End: S

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	ONDANSETRON HCL 2 MG/ML INTRAVENOUS SOLUTION	Medications	16 mg	Yes	No
	DEXAMETHASONE 4 MG/ML INJECTION SOLUTION	Medications		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

Pre-Medications

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

Dose: 650 mg Route: oral once for 1 dose
Start: S
Instructions:
Pre-med for Avastin

☒ **diphenhydramine (BENADRYL) tablet 25 mg**

Dose: 25 mg Route: oral once for 1 dose
Start: S
Instructions:
Pre-med for Avastin

☐ **dexamethasone (DECADRON) injection 10 mg**

Dose: 10 mg Route: intravenous once for 1 dose
Start: S
Instructions:
Pre-med for Avastin

Chemotherapy

topotecan (HYCAMTIN) 4 mg/m2 in sodium chloride 0.9 % 100 mL chemo IVPB

Dose: 4 mg/m2 Route: intravenous once over 30 Minutes for 1 dose
Offset: 30 Minutes

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	TOPOTECAN 4 MG INTRAVENOUS SOLUTION	Medications	4 mg/m2	Main Ingredient	Yes
	SODIUM CHLORIDE 0.9 %	QS Base		Yes	Yes

INTRAVENOUS SOLUTION DEXTROSE 5 % IN QS Base WATER (D5W) INTRAVENOUS SOLUTION	No	Yes
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Chemotherapy

bevacizumab (AVASTIN) 10 mg/kg in sodium chloride 0.9 % 100 mL IVPB

Dose: 10 mg/kg Route: intravenous once over 90 Minutes for 1 dose
Offset: 60 Minutes

Instructions:

For Initial Infusion, administer over 90 minutes.

If no reaction with first infusion, may give second infusion over 60 minutes. If no reaction with second infusion, may give third and subsequent infusions over 30 minutes.

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	BEVACIZUMAB 25 MG/ML	Medications	10 mg/kg	Main Ingredient	Yes
	INTRAVENOUS SOLUTION SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	QS Base	100 mL	Yes	Yes

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

☒ **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.

Day 8

Perform every 1 day x1

Labs

☒ **COMPREHENSIVE METABOLIC PANEL**

Interval: Once

Occurrences: --

☒ **CBC WITH PLATELET AND DIFFERENTIAL**

Interval: Once

Occurrences: --

☒ **MAGNESIUM LEVEL**

Interval: Once

Occurrences: --

☒ **URINALYSIS, AUTOMATED WITH
MICROSCOPY**

Interval: Once

Occurrences: --

☐ **CANCER ANTIGEN 125**

Interval: Once

Occurrences: --

Nursing Orders

TREATMENT CONDITIONS 5

Interval: Once

Occurrences: --

Comments:

HOLD and notify provider if PROTEIN 2+ is detected in Urinalysis.

Nursing Orders

TREATMENT CONDITIONS 13

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

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

☒ **ondansetron (ZOFTRAN) injection 8 mg**

Dose: 8 mg

Route: intravenous

once for 1 dose

Start: S

☐ **ondansetron (ZOFTRAN) tablet 16 mg**

Dose: 16 mg

Route: oral

once for 1 dose

Start: S

○ **ondansetron (ZOFTRAN) 16 mg in dextrose 5% 50 mL IVPB**

Dose: 16 mg

Start: S

Ingredients:

Route: intravenous

End: S

once over 15 Minutes for 1 dose

Name	Type	Dose	Selected	Adds Vol.
ONDANSETRON HCL 2 MG/ML INTRAVENOUS SOLUTION	Medications	16 mg	Yes	No
DEXAMETHASONE 4 MG/ML INJECTION SOLUTION	Medications		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

Chemotherapy

topotecan (HYCAMTIN) 4 mg/m2 in sodium chloride 0.9 % 100 mL chemo IVPB

Dose: 4 mg/m2

Route: intravenous

once over 30 Minutes for 1 dose

Offset: 30 Minutes

Ingredients:

Name	Type	Dose	Selected	Adds Vol.
TOPOTECAN 4 MG INTRAVENOUS SOLUTION	Medications	4 mg/m2	Main Ingredient	Yes
SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	QS Base		Yes	Yes
DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	QS Base		No	Yes

Day 15

Perform every 1 day x1

Provider Communication

ONC PROVIDER COMMUNICATION 10

Interval: Once

Occurrences: --

Comments:

Please order Growth Factor to begin on Day 16, if indicated.

If patient will be discharged, consider using Neulasta Therapy Plan for Outpatient use.

Labs

☒ **COMPREHENSIVE METABOLIC PANEL**

Interval: Once

Occurrences: --

☒ **CBC WITH PLATELET AND DIFFERENTIAL**

Interval: Once

Occurrences: --

☒ **MAGNESIUM LEVEL**

Interval: Once

Occurrences: --

☒ **URINALYSIS, AUTOMATED WITH MICROSCOPY**

Interval: Once

Occurrences: --

☐ **CANCER ANTIGEN 125**

Interval: Once

Occurrences: --

Nursing Orders

TREATMENT CONDITIONS 5

Interval: Once

Occurrences: --

Comments:

HOLD and notify provider if PROTEIN 2+ is detected in Urinalysis.

Nursing Orders

TREATMENT CONDITIONS 13

Interval: Until

Occurrences: --

discontinued

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

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

☒ **ondansetron (ZOFRAN) injection 8 mg**

Dose: 8 mg

Route: intravenous

once for 1 dose

Start: S

☐ **ondansetron (ZOFRAN) tablet 16 mg**

Dose: 16 mg

Route: oral

once for 1 dose

Start: S

☐ **ondansetron (ZOFRAN) 16 mg in dextrose 5% 50 mL IVPB**

Dose: 16 mg

Route: intravenous

once over 15 Minutes for 1 dose

Start: S

End: S

Ingredients:

Name

Type

Dose

Selected

Adds Vol.

ONDANSETRON

Medications

16 mg

Yes

No

HCL 2 MG/ML

INTRAVENOUS

SOLUTION

DEXAMETHASONE Medications

No

No

4 MG/ML

INJECTION

SOLUTION

SODIUM

Base

50 mL

No

Yes

CHLORIDE 0.9 %

INTRAVENOUS

SOLUTION

DEXTROSE 5 % IN Base

50 mL

Yes

Yes

WATER (D5W)

INTRAVENOUS

SOLUTION

Pre-Medications

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

Dose: 650 mg

Route: oral

once for 1 dose

Start: S

Instructions:

Pre-med for Avastin

☒ **diphenhydramine (BENADRYL) tablet 25 mg**

Dose: 25 mg

Route: oral

once for 1 dose

Start: S

Instructions:

Pre-med for Avastin

☐ **dexamethasone (DECADRON) injection 10 mg**

Dose: 10 mg

Route: intravenous

once for 1 dose

Start: S

Instructions:

Pre-med for Avastin

Chemotherapy

topotecan (HYCAMTIN) 4 mg/m2 in sodium chloride 0.9 % 100 mL chemo IVPB

Dose: 4 mg/m2

Route: intravenous

once over 30 Minutes for 1 dose

Offset: 30 Minutes

Ingredients:

Name

Type

Dose

Selected

Adds Vol.

TOPOTECAN 4 MG
INTRAVENOUS
SOLUTION

Medications

4 mg/m2

Main
Ingredient

Yes

SODIUM
CHLORIDE 0.9 %
INTRAVENOUS
SOLUTION

QS Base

Yes

Yes

DEXTROSE 5 % IN
WATER (D5W)
INTRAVENOUS
SOLUTION

QS Base

No

Yes

Chemotherapy

bevacizumab (AVASTIN) 10 mg/kg in sodium chloride 0.9 % 100 mL IVPB

Dose: 10 mg/kg

Route: intravenous

once over 90 Minutes for 1 dose

Offset: 60 Minutes

Instructions:

For Initial Infusion, administer over 90 minutes.

If no reaction with first infusion, may give
second infusion over 60 minutes. If no
reaction with second infusion, may give third
and subsequent infusions over 30 minutes.

Ingredients:

Name

Type

Dose

Selected

Adds Vol.

BEVACIZUMAB 25
MG/ML
INTRAVENOUS
SOLUTION

Medications

10 mg/kg

Main
Ingredient

Yes

SODIUM
CHLORIDE 0.9 %
INTRAVENOUS
SOLUTION

QS Base

100 mL

Yes

Yes