IP XELOX (EVERY 21 DAYS) + CETUXIMAB D1, 8, 15

Types: ONCOLOGY TREATMENT

Synonyms: COLORECTAL, GI, GASTRO, CETUX, ERBI, ERBY, CAPE, XELODA, ZELODA, OXALIPLATIN,

ELOXATIN, XELOX

Cycle 1		Repeat 1	time	Cycle length: 21 days	
Day	1	nepedi i	unic	Oyole length. 21 days	Perform every 1 day x1
		der Communication			
		ONC PROVIDER COM Interval: Once Comments:	Occurrences: Tumor KRAS gene stat	tus should be determined Please Push F2:1155402	
	Labs				
		☑ CBC WITH PLATELET	AND DIFFERENTIAL		
		Interval: Once	Occurrences:		
		☑ COMPREHENSIVE ME	TABOLIC PANEL		
		Interval: Once	Occurrences:		
		✓ MAGNESIUM LEVEL			
		Interval: Once	Occurrences:		
		□ LDH			
		Interval: Once	Occurrences:		
		☐ URIC ACID LEVEL			
		Interval: Once	Occurrences:		
	Nursi	ng Orders			
		TREATMENT CONDIT Interval: Once Comments:	Occurrences: HOLD and notify provic 100,000; Total Bilirubin	der if ANC LESS than 100 GREATER than 1.5; ALT mal; Magnesium LESS th	7/AST GREATER than 3
	Line I	lush			
		dextrose 5% flush syr Dose: 20 mL Start: S Instructions: Administer ONLY for	Route: intravenous	PRN	
		sodium chloride 0.9 % Dose: 20 mL Start: S Instructions: Do NOT administer w	Route: intravenous	PRN	
	Nursi	ng Orders	, and the second		
		dextrose 5% infusion Dose: 250 mL Start: S Instructions: To keep vein open fo	Route: intravenous	once @ 30 mL/hr for 1 c	dose
		sodium chloride 0.9 % Dose: 250 mL Start: S	Route: intravenous	once @ 30 mL/hr for 1 c	dose

	Instructions: To keep vein open. Oxaliplatin.	Do NOT administer with				
Pre-M	ledications					
	acetaminophen (TYL) Dose: 650 mg Start: S	ENOL) tablet 650 mg Route: oral	once for 1 do	se		
	diphenhydrAMINE (B mg	ENADRYL) injection 25				
	Dose: 25 mg Start: S Instructions: Give 30 minutes prio	Route: intravenous or to cetuximab.	once for 1 do	se		
Pre-M	ledications					
		N) 16 mg, dexamethasor in sodium chloride 0.9%	ne			
	Dose: Start: S	Route: intravenous End: S 11:30 AM	once over 15	Minutes fo		
	Ingredients:	Name ONDANSETRON HCL (PF) 4 MG/2 ML INJECTION SOLUTION	Type Medications	Dose 16 mg	Selected Yes	Adds Vol. No
		DEXAMETHASONE 4 MG/ML INJECTION SOLUTION	Medications	12 mg	Yes	No
		SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	Base	50 mL	Always	Yes
		DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	Base		No	Yes
	☐ ondansetron (ZOFRA)	N) tablet 16 mg				
	Dose: 16 mg Start: S	Route: oral End: S 11:30 AM	once for 1 do	se		
	☐ dexamethasone (DEC	CADRON) tablet 12 mg				
	Dose: 12 mg Start: S	Route: oral	once for 1 do	se		
	aprepitant (CINVANT) (NON-PVC) 5% 130 m Dose: 130 mg		once over 30	Minutes fo	r 1 dose	
	Start: S End: S					
	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	Base /	130 mL	No	Yes

		(EXCEL;NON-PVC)			
Pre-M	Medications				
	diphenhydrAMINE (Bi	ENADRYL) injection 25			
	Dose: 25 mg Start: S	Route: intravenous	once for 1 do	se	
	Instructions: Give 30 minutes prio	r to cetuximah			
Supp	ortive Care	i to octaxiii ab.			
	○ LORAZepam (ATIVAN	l) injection 1 mg			
	Dose: 1 mg Start: S	Route: intravenous	PRN		
	○ LORAZepam (ATIVAN	I) tablet 1 mg			
	Dose: 1 mg Start: S	Route: oral	PRN		
Chem	notherapy				
	cetuximab (ERBITUX) Dose: 400 mg/m2	400 mg/m2 in 0 mL Route: intravenous	once over 12 Offset: 30 Mir		for 1 dose
	protein binding 0.22 shake. Do not mix wi Flush IV line with NS	th other medications. at the end of infusion. rst 10 mL over 10 minutes	ı		
	reactions if infusion to dose over 120 minute				
	Rate of infusion not t mL/minute)	o exceed 10 mg/minute (5	,		
	Ingredients:	Name CETUXIMAB 100 MG/50 ML INTRAVENOUS SOLUTION	Type Medications	Dose 400 mg/m2	Selected Adds Vol. Main Yes Ingredient
	capecitabine (XELOD				
	mg/m2 (Treatment Pla Dose: 850 mg/m2	Route: oral	2 times daily Offset: 2.5 Ho		es
	Instructions: Day 1-14. DO NOT (HAZARDOUS Handl	CUT OR CRUSH TABLET e with care.			
	OXALIplatin (ELOXA) dextrose 5% 500 mL o Dose: 130 mg/m2		once over 12	0 Minutos	for 1 doso
	Instructions: Irritant - avoid extrav D5W before and afte	asation. Flush line with r oxaliplatin infusion.	Offset: 2.5 Ho		ioi i dose
	Administer on Day 1. Ingredients:	Name OXALIPLATIN 100 MG/20 ML INTRAVENOUS	Type Medications	Dose 130 mg/m2	Selected Adds Vol. Main Yes Ingredient

SOLUTION

DEXTROSE 5 % IN QS Base

500 mL Yes

Yes

WATER (D5W) INTRAVENOUS SOLUTION

Nursing Orders

ONC NURSING COMMUNICATION 11

Interval: Once

Comments:

Occurrences: -Exposure to cold may exacerbate oxaliplatin-induced neuropathy

(including pharyngolaryngeal dysesthesia). Encourage patient to keep blanket on their chest and/or throat during oxaliplatin infusion. Educate patient to avoid cold drinks/foods, ice chips or exposure to cold water or

air for 7 days after oxaliplatin infusion.

ONC NURSING COMMUNICATION 12

Interval: Once Occurrences: --

Comments: Assess and notify provider for persistent neuropathy (Grade 2).

Nursing Orders

ONC NURSING COMMUNICATION 15

Interval: Once Occurrences: --

Comments: Verify that the patient has appropriate prescription for oral chemotherapy

medication.

Nursing Orders

ONC NURSING COMMUNICATION

Interval: Once Occurrences: --

Comments: Contact Provider if drug-induced acneiform rash develops and covers

more than 25 percent of the body.

Hematology & Oncology Hypersensitivity Reaction Standing Order

ONC NURSING COMMUNICATION 82

Interval: Until discontinued

Occurrences: --

Comments: Grad

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 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

ma

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

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.

Days 8,15 Perform every 7 days x2

Labs

BASIC METABOLIC PANEL

Interval: Once Occurrences: --

Labs

MAGNESIUM LEVEL

Interval: Once Occurrences: --

Nursing Orders

TREATMENT CONDITIONS 7

Interval: Until Occurrences: --

discontinued

Comments: HOLD and notify provider if Magnesium LESS than or EQUAL to 1.7.

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.

Supportive Care

○ LORAZepam (ATIVAN) injection 1 mg

Dose: 1 mg Route: intravenous PRN

Start: S

LORAZepam (ATIVAN) tablet 1 mg

Dose: 1 mg Route: oral PRN

Start: S

Pre-Medications

acetaminophen (TYLENOL) tablet 650 mg

Dose: 650 mg Route: oral once for 1 dose

Start: S

diphenhydrAMINE (BENADRYL) injection 25

mg

Dose: 25 mg Route: intravenous once for 1 dose

Start: S Instructions:

Give 30 minutes prior to cetuximab.

Chemotherapy

cetuximab (ERBITUX) 250 mg/m2 in 0 mL

Dose: 250 mg/m2 Route: intravenous once over 60 Minutes for 1 dose

Offset: 30 Minutes

Instructions:

Administer with low protein binding 0.22 micron filter. Do not shake. Do not mix with other medications. Flush IV line with NS at the end of infusion.

Rate of infusion not to exceed 10 mg/minute (5

mL/minute)

Ingredients: Name Type Dose Selected Adds Vol.

CETUXIMAB 100 Medications 250 Main Yes MG/50 ML Ingredient

INTRAVENOUS SOLUTION

Nursing Orders

ONC NURSING COMMUNICATION 15

Interval: Once Occurrences: --

Comments: Verify that the patient has appropriate prescription for oral chemotherapy

medication.

Nursing Orders

ONC NURSING COMMUNICATION

Interval: Once Occurrences: --

Comments: Contact Provider if drug-induced acneiform rash develops and covers

more than 25 percent of the body.

Cycle 2 Repeat 1 time Cycle length: 21 days

Day 1 Perform every 1 day x1

Labs

□ CBC WITH PLATELET AND DIFFERENTIAL

Interval: Once Occurrences: --

□ COMPREHENSIVE METABOLIC PANEL

Interval: Once Occurrences: --

MAGNESIUM LEVEL

Interval: Once Occurrences: --

□ LDH

Interval: Once Occurrences: --

□ URIC ACID LEVEL

Interval: Once Occurrences: --

Nursing Orders

TREATMENT CONDITIONS 4

Interval: Once Occurrences: --

Comments: HOLD and notify provider if ANC LESS than 1000; Platelets LESS than

PRN

100,000; Total Bilirubin GREATER than 1.5; ALT/AST GREATER than 3 times upper limit of normal; Magnesium LESS than or EQUAL to 1.7.

Line Flush

dextrose 5% flush syringe 20 mL

Dose: 20 mL Route: intravenous PRN

Start: S Instructions:

Administer ONLY for Oxaliplatin.

sodium chloride 0.9 % flush 20 mL

Dose: 20 mL Route: intravenous

Start: S Instructions:

Nursing Orders dextrose 5% infusion 250 mL Dose: 250 mL Sodium chloride 0.9 % infusion 250 mL Dose: 250 mL Sodium chloride 0.9 % infusion 250 mL Dose: 250 mL Start: S Instructions: To keep vein open. Oxaliplatin. Pre-Medications acctaminophen (TYLENOL) tablet 650 mg Dose: 650 mg Dose: 650 mg Pose: 650 mg Dose: 25 mg Route: intravenous Start: S Instructions: Give 30 minutes prior to cetuximab. Pre-Medications acctaminophen (TYLENOL) tablet 650 mg Dose: 650 mg Dose: 15 mg Dose: 25 mg Route: intravenous Start: S Instructions: Give 30 minutes prior to cetuximab. Pre-Medications ondansetron (ZOFRAN) 16 mg, dexamethason ondansetron (ZOFRAN) 16 mg, dexamethason Start: S Instructions: Give 30 minutes prior to cetuximab. Pre-Medications ondansetron (ZOFRAN) 16 mg, dexamethason ONDANSETRON HCIL (PF) 4 MG/2 ML INJECTION SISULTION DEXAMETHASONE Medications 12 mg Yes No HCIL (PF) 4 MG/2 ML INJECTION SISULTION SISULTION SISULTION DEXTROSE 5 % IN Base No Yes WATER (DSW) INTRAVENOUS SISULTION DESSENCE End: S 11:30 AM CHLCRIDE 0.9 % INTRAVENOUS SISULTION DEXTROSE 5 % IN Base No Yes WATER (DSW) INTRAVENOUS SISULTION DESSENCE End: S 11:30 AM CHALPROSE 5 % IN Base No Yes WATER (DSW) INTRAVENOUS SISULTION DESSENCE End: S 11:30 AM CHALPROSE 5 % IN Base No Dose: 16 mg Route: oral Dose: 12 mg Route:		Do NOT administor w	ith Ovalinlatin				
dextrose 5% influsion 250 mL Dose: 250 mL Route: intravenous Start: S Instructions: To keep vein open for Oxaliplatin. Sodium chloride 0.9 % influsion 250 mL Dose: 250 mL Route: intravenous Start: S Instructions: To keep vein open. Do NOT administer with Oxaliplatin. Oxaliplatin. Oxaliplatin: To keep vein open. Do NOT administer with Oxaliplatin: Oxaliplatin: To keep vein open. Oxaliplatin: To keep vein open.	Nureino		лит Охапріант.				
To keep vein open for Oxaliplatin. sodium chloride 0.9 % infusion 250 mL Dose: 250 mL Dose: 250 mL Route: intravenous Start: S Instructions: To keep vein open. Do NOT administer with Oxaliplatin. Pre-Medications acetaminophen (TYLENOL) tablet 650 mg Dose: 650 mg Route: oral Start: S diphenhydrAMINE (BENADRYL) injection 25 mg Dose: 25 mg Route: intravenous Start: S Instructions: Give 30 minutes prior to cetuximab. Pre-Medications ondansetron (ZOFRAN) 16 mg, dexamethasone (DECADRON) 12 mg in sodium chloride 0.9% 50 mL IVPB Dose: - Route: intravenous Start: S End: S 11:30 AM Ingredients: Name ONDANSETRON HCL (PF) 4 MG/2 ML INJECTION SOLUTION DEXAMETHASONE Medications 12 mg Yes No 4 MG/ML INJECTION SOLUTION DEXAMETHASONE Medications 12 mg Yes No 4 MG/ML INJECTION SOLUTION DEXAMETHASONE Medications 12 mg Yes No 4 MG/ML INJECTION SOLUTION DEXAMETHASONE Medications 12 mg Yes No 4 MG/ML INJECTION SOLUTION DEXAMETHASONE Medications 12 mg Yes No 4 MG/ML INJECTION SOLUTION DEXAMETHASONE Medications 12 mg Yes No 4 MG/ML INJECTION SOLUTION DEXAMETHASONE Medications 12 mg Yes No 4 MG/ML INJECTION SOLUTION DEXAMETHASONE Medications 12 mg Yes No 4 MG/ML INJECTION SOLUTION DEXAMETHASONE Medications 12 mg Yes No 4 MG/ML INJECTION SOLUTION DEXAMETHASONE Medications 12 mg Yes No 4 MG/ML INJECTION SOLUTION DEXAMETHASONE Medications 12 mg Yes No 4 MG/ML INJECTION SOLUTION DEXAMETHASONE Medications 12 mg Yes No 4 MG/ML INJECTION SOLUTION DEXAMETHASONE Medications 12 mg Yes No 4 MG/ML INJECTION SOLUTION DEXAMETHASONE Medications 12 mg Yes No 4 MG/ML INJECTION SOLUTION DEXAMETHASONE Medications 12 mg Yes No 4 MG/ML INJECTION SOLUTION DEXAMETHASONE Medications 12 mg Yes No 4 MG/ML INJECTION SOLUTION DEXAMETHASONE Medications 12 mg Yes No 4 MG/ML INJECTION SOLUTION DEXAMETHASONE Medications 12 mg Yes No 4 MG/ML INJECTION SOLUTION SOLUTION Once Yes No 4 MG/ML INJECTION SOLUTION SOLUTION DEXAMETHASONE MEDICATION SOLUTION Once Yes No 4 MG/ML INJECTION SOLUTION SOLUTION SOLUTION Once Yes No 4 MG/ML INJECTION SOLUTION SOLUTION SOLUTION On	Nuising	dextrose 5% infusion Dose: 250 mL Start: S		once @ 30 m	L/hr for 1 c	lose	
Doss: 250 mL Start: S Instructions: To keep vein open. Do NOT administer with Oxaliplatin. Pre-Medications acetaminophen (TYLENOL) tablet 650 mg Doss: 650 mg Route: oral once for 1 dose Start: S diphenhydrAMINE (BENADRYL) injection 25 mg Doss: 25 mg Route: intravenous once for 1 dose Start: S Instructions: Give 30 minutes prior to cetuximab. Pre-Medications ondansetron (ZOFRAN) 16 mg, dexamethasone [Injectation (ZOFRAN) 17 mg in sodium chloride 0.9% 50 mL IVPB Doss:		To keep vein open fo					
Pre-Medications acetaminophen (TYLENOL) tablet 650 mg Dose: 650 mg Route: oral once for 1 dose Start: S diphenhydrAMINE (BENADRYL) injection 25 mg Dose: 25 mg Route: intravenous once for 1 dose Start: S Instructions: Give 30 minutes prior to cetuximab. Pre-Medications ondansetron (ZOFRAN) 16 mg, dexamethasone Q (DECADRON) 12 mg in sodium chloride 0.9% 50 mL IVPB Dose:		Dose: 250 mL Start: S Instructions: To keep vein open.	Route: intravenous	once @ 30 m	L/hr for 1 c	lose	
acetaminophen (TYLENOL) tablet 650 mg Dose: 650 mg Start: S diphenhydrAMINE (BENADRYL) injection 25 mg Dose: 25 mg Pre-Medications Give 30 minutes prior to cetuximab. Pre-Medications Ondansetron (ZOFRAN) 16 mg, dexamethasone ORECADRON) 12 mg in sodium chloride 0.9% 50 mL IVPB Dose: Start: S Instructions: Give 30 minutes prior to cetuximab. Pre-Medications Ondansetron (ZOFRAN) 16 mg, dexamethasone ORECADRON) 12 mg in sodium chloride 0.9% 50 mL IVPB Dose: Name ONDANSETRON HCL (PF) 4 MG/2 ML INJECTION SOLUTION DEXAMETHASONE Medications 16 mg Yes No 4 MG/ML INJECTION SOLUTION DEXAMETHASONE Medications 12 mg Yes No 4 MG/ML INJECTION SOLUTION SOLUT	Pre-Me						
mg Dose: 25 mg Start: S Instructions: Give 30 minutes prior to cetuximab. Pre-Medications ondansetron (ZOFRAN) 16 mg, dexamethasone ② (DECADRON) 12 mg in sodium chloride 0.9% 50 mL IVPB Dose: - Start: S End: S 11:30 AM Ingredients: Name ONDANSETRON HCL (PF) 4 MG/2 ML INJECTION SOLUTION DEXAMETHASONE Medications 12 mg Yes No 4 MG/ML INJECTION SOLUTION SOLUTION SOLUTION SOLUTION SOLUTION SOLUTION SOLUTION SOLUTION SOLUTION DEXTROSE 5 % IN Base No Yes No Yes Once over 15 Minutes for 1 dose Medications 16 mg Yes No N		acetaminophen (TYLE Dose: 650 mg		once for 1 dos	se		
Instructions: Give 30 minutes prior to cetuximab.		mg Dose: 25 mg		once for 1 dos	se		
Pre-Medications		Instructions:	to cetuvimah				
ondansetron (ZOFRAN) 16 mg, dexamethasone (DECADRON) 12 mg in sodium chloride 0.9% 50 mL IVPB Dose: Start: S End: S 11:30 AM Ingredients: Name ONDANSETRON HCL (PF) 4 MG/2 ML INJECTION SOLUTION DEXAMETHASONE Medications SOLUTION DEXTROSE 5 % IN Base No Yes No Yes once for 1 dose The providence of the provi	Pre-Ma		to detuximad.				
Ingredients: Name ONDANSETRON HCL (PF) 4 MG/2 MIL INJECTION SOLUTION DEXAMETHASONE Medications 12 mg Yes No No A MG/ML INJECTION SOLUTION DEXAMETHASONE Medications 12 mg Yes No A MG/ML INJECTION SOLUTION DEXTROSE 5 % IN Base No Yes No Always Yes CHLORIDE 0.9 % INTRAVENOUS SOLUTION DEXTROSE 5 % IN Base No Yes No Yes No Always Yes Once for 1 dose The control of		✓ (DECADRON) 12 mg i 50 mL IVPB Dose:	n sodium chloride 0.9% Route: intravenous		Minutes fo	r 1 dose	
DEXAMETHASONE Medications 12 mg Yes No 4 MG/ML INJECTION SOLUTION DEXTROSE 5 % IN Base No Yes WATER (D5W) INTRAVENOUS SOLUTION ondansetron (ZOFRAN) tablet 16 mg			Name ONDANSETRON HCL (PF) 4 MG/2 ML INJECTION				
CHLORIDE 0.9 % INTRAVENOUS SOLUTION DEXTROSE 5 % IN Base No Yes WATER (D5W) INTRAVENOUS SOLUTION Ondansetron (ZOFRAN) tablet 16 mg Dose: 16 mg Start: S End: S 11:30 AM Dose: 12 mg Start: S Route: oral Start: S aprepitant (CINVANTI) 130 mg in dextrose (NON-PVC) 5% 130 mL IVPB Dose: 130 mg Start: S End: S Ingredients: Name Type Dose Selected Adds Vol.			DEXAMETHASONE 4 MG/ML INJECTION	Medications	12 mg	Yes	No
DEXTROSE 5 % IN Base No Yes WATER (D5W) INTRAVENOUS SOLUTION Ondansetron (ZOFRAN) tablet 16 mg Dose: 16 mg Start: S End: S 11:30 AM dexamethasone (DECADRON) tablet 12 mg Dose: 12 mg Start: S aprepitant (CINVANTI) 130 mg in dextrose (NON-PVC) 5% 130 mL IVPB Dose: 130 mg Start: S End: S Ingredients: Name No Yes No Yes No Yes			CHLORIDE 0.9 % INTRAVENOUS	Base	50 mL	Always	Yes
Dose: 16 mg			WATER (D5W) INTRAVENOUS	Base		No	Yes
Start: S End: S 11:30 AM dexamethasone (DECADRON) tablet 12 mg Dose: 12 mg Route: oral once for 1 dose Start: S aprepitant (CINVANTI) 130 mg in dextrose (NON-PVC) 5% 130 mL IVPB Dose: 130 mg Route: intravenous Start: S End: S Ingredients: Name Type Dose Selected Adds Vol.		□ ondansetron (ZOFRA	N) tablet 16 mg				
Dose: 12 mg Start: S aprepitant (CINVANTI) 130 mg in dextrose (NON-PVC) 5% 130 mL IVPB Dose: 130 mg Start: S Ingredients: Route: oral once for 1 dose once over 30 Minutes for 1 dose Type Dose Selected Adds Vol.				once for 1 dos	se		
Start: S aprepitant (CINVANTI) 130 mg in dextrose (NON-PVC) 5% 130 mL IVPB Dose: 130 mg Start: S End: S Ingredients: Name Name Route: once over 30 Minutes for 1 dose Type Dose Selected Adds Vol.		☐ dexamethasone (DEC	ADRON) tablet 12 mg				
ONON-PVC) 5% 130 mL IVPB Dose: 130 mg Route: intravenous once over 30 Minutes for 1 dose Start: S End: S Ingredients: Name Type Dose Selected Adds Vol.			Route: oral	once for 1 dos	se		
Dose: 130 mg Start: S Ingredients: Route: intravenous once over 30 Minutes for 1 dose End: S Type Dose Selected Adds Vol.							
		Dose: 130 mg Start: S	Route: intravenous End: S				Adde Vol
		iligieulelits.					

		MG/ML INTRAVENOUS EMULSION			Ingredient	
		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
Suppo	ortive Care					
	○ LORAZepam (ATIVAN)) injection 1 mg				
	Dose: 1 mg Start: S	Route: intravenous	PRN			
	○ LORAZepam (ATIVAN)	tablet 1 mg				
	Dose: 1 mg Start: S	Route: oral	PRN			
Chem	otherapy					
	cetuximab (ERBITUX) Dose: 250 mg/m2	250 mg/m2 in 0 mL Route: intravenous	once over 60 Offset: 30 Mir		r 1 dose	
	filter. Do not shake. D	rotein binding 0.22 micror o not mix with other line with NS at the end	1			
		exceed 10 mg/minute (5	;			
	mL/minute) Ingredients:	Name CETUXIMAB 100 MG/50 ML INTRAVENOUS SOLUTION	Type Medications	Dose 250 mg/m2	Selected Main Ingredient	Adds Vol. Yes
	capecitabine (XELODA					
	mg/m2 (Treatment Pla Dose: 850 mg/m2	Route: oral	2 times daily Offset: 1.5 Ho		es	
	Instructions: Day 1-14. DO NOT C HAZARDOUS Handle	UT OR CRUSH TABLET with care.				
	OXALIplatin (ELOXAT dextrose 5% 500 mL c					
	Dose: 130 mg/m2	once over 120 Minutes for 1 dose Offset: 1.5 Hours				
	Instructions: Irritant - avoid extrava D5W before and after Administer on Day 1.					
	Ingredients:	Name OXALIPLATIN 100 MG/20 ML INTRAVENOUS SOLUTION	Type Medications	Dose 130 mg/m2	Selected Main Ingredient	Adds Vol. Yes
		DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS	QS Base	500 mL	Yes	Yes

SOLUTION

Nursing Orders

ONC NURSING COMMUNICATION 11

Interval: Once Occurrences: --

Comments: Exposure to cold may exacerbate oxaliplatin-induced neuropathy

(including pharyngolaryngeal dysesthesia). Encourage patient to keep blanket on their chest and/or throat during oxaliplatin infusion. Educate patient to avoid cold drinks/foods, ice chips or exposure to cold water or

air for 7 days after oxaliplatin infusion.

ONC NURSING COMMUNICATION 12

Interval: Once Occurrences: --

Comments: Assess and notify provider for persistent neuropathy (Grade 2).

Nursing Orders

ONC NURSING COMMUNICATION 15

Interval: Once Occurrences: --

Comments: Verify that the patient has appropriate prescription for oral chemotherapy

medication.

Nursing Orders

ONC NURSING COMMUNICATION

Interval: Once Occurrences: --

Comments: Contact Provider if drug-induced acneiform rash develops and covers

more than 25 percent of the body.

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 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

mq

Dose: 20 ma

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 PRN Route: subcutaneous

Start: S

Discharge Nursing Orders

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.

Days 8,15 Perform every 7 days x2

Labs

BASIC METABOLIC PANEL

Interval: Once Occurrences: --

Labs

MAGNESIUM LEVEL

Interval: Once Occurrences: --

Nursing Orders

TREATMENT CONDITIONS 7

Interval: Until Occurrences: --

discontinued

Comments: HOLD and notify provider if Magnesium LESS than or EQUAL to 1.7.

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

acetaminophen (TYLENOL) tablet 650 mg

Dose: 650 mg Route: oral once for 1 dose

Start: S

diphenhydrAMINE (BENADRYL) injection 25

mg

Dose: 25 mg Route: intravenous once for 1 dose

Start: S Instructions:

Give 30 minutes prior to cetuximab.

Supportive Care

○ LORAZepam (ATIVAN) injection 1 mg

Dose: 1 mg Route: intravenous PRN

Start: S

O LORAZepam (ATIVAN) tablet 1 mg

Dose: 1 mg Route: oral PRN

Start: S

Chemotherapy

cetuximab (ERBITUX) 250 mg/m2 in 0 mL

Dose: 250 mg/m2 Route: intravenous once over 60 Minutes for 1 dose

Offset: 30 Minutes

Instructions:

Administer with low protein binding 0.22 micron filter. Do not shake. Do not mix with other medications. Flush IV line with NS at the end

of infusion.

Rate of infusion not to exceed 10 mg/minute (5

mL/minute)

Ingredients: Name Type Dose Selected Adds Vol.

CETUXIMAB 100 Medications 250 Main Yes MG/50 ML mg/m2 Ingredient

INTRAVENOUS SOLUTION

Nursing Orders

ONC NURSING COMMUNICATION 15
Interval: Once Occurrences: --

Comments: Verify that the patient has appropriate prescription for oral chemotherapy

medication.

Nursing Orders

ONC NURSING COMMUNICATION
Interval: Once Occurrences: --

Comments: Contact Provider if drug-induced acneiform rash develops and covers

more than 25 percent of the body.