

OP ARSENIC TRIOXIDE MAINTENANCE (EVERY 28 DAYS)

Types: ONCOLOGY TREATMENT

Synonyms: ACUTE, PROMY, LEUKE, APL, ARSE, TRIOX, ARSEIS, MAINT, MAINTENANCE, ARSENIC

Cycle 1	Repeat 1 time	Cycle length: 28 days
Day 1 Perform every 1 day x1		
Appointment Requests		
INFUSION APPOINTMENT REQUEST Interval: -- Occurrences: --		
Labs		
<input checked="" type="checkbox"/> CBC WITH PLATELET AND DIFFERENTIAL Interval: -- Occurrences: --		
<input checked="" type="checkbox"/> COMPREHENSIVE METABOLIC PANEL Interval: -- Occurrences: --		
<input checked="" type="checkbox"/> MAGNESIUM LEVEL Interval: -- Occurrences: --		
<input type="checkbox"/> LDH Interval: -- Occurrences: --		
<input type="checkbox"/> URIC ACID LEVEL Interval: -- Occurrences: --		
Labs		
ECG 12-LEAD Interval: -- Occurrences: --		
Provider Communication		
ONC PROVIDER COMMUNICATION 5 Interval: -- Occurrences: -- Comments: Use baseline weight to calculate dose. Adjust dose for weight gains/losses of greater than or equal to 10%.		
Provider Communication		
ONC NURSING COMMUNICATION 67 Interval: -- Occurrences: -- Comments: Order EKG at baseline, then weekly. Prolonged QT is greater than or equal to 500 milliseconds (11 boxes).		
Nursing Orders		
ONC PROVIDER COMMUNICATION 10 Interval: -- Occurrences: -- Comments: Please verify that patient is taking oral chemotherapy (Tretinoin) as directed by physician.		
Nursing Orders		
ONC NURSING COMMUNICATION 67 Interval: -- Occurrences: -- Comments: Supplement to maintain magnesium GREATER than 2 and potassium GREATER than 4. Refer to Potassium Replacement Scale.		
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) 16 mg, dexamethasone

- (DECADRON) 12 mg in sodium chloride 0.9% 50 mL IVPB**

Dose: -- Route: intravenous once over 15 Minutes for 1 dose

Start: S

Ingredients:

Name	Type	Dose	Selected	Adds Vol.
ONDANSETRON HCL (PF) 4 MG/2 ML INJECTION SOLUTION	Medications	16 mg	Yes	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 (ZOFTRAN) tablet 16 mg**

Dose: 16 mg Route: oral once for 1 dose

Start: S

- 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 once over 30 Minutes for 1 dose

Start: S

End: S

Ingredients:

Name	Type	Dose	Selected	Adds Vol.
APREPITANT 7.2 MG/ML INTRAVENOUS EMULSION	Medications	130 mg	Main Ingredient	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

Chemotherapy

arsenic trioxide (TRISENOX) 0.15 mg/kg in sodium chloride 0.9% 250 mL chemo IVPB

Dose: 0.15 mg/kg Route: intravenous once over 2 Hours for 1 dose
Offset: 30 Minutes

Instructions:

This drug requires close monitoring of electrolytes. Check electrolytes twice weekly and supplement to keep magnesium greater than 2 and potassium greater than 4.

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	ARSENIC TRIOXIDE 2 MG/ML INTRAVENOUS SOLUTION	Medications	0.15 mg/kg	Main Ingredient	Yes
	SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	QS Base	250 mL	Yes	Yes
	DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	QS Base	250 mL	No	Yes

Electrolyte Replacement

TREATMENT CONDITIONS 39

Interval: -- Occurrences: --
 Comments: Potassium (Normal range 3.5 to 5.0mEq/L)

- o Serum potassium less than 2.9mEq/L, Call MD/NP
- o Serum potassium 3.0 to 3.5mEq/L, give 40mEq KCL IV and 40mEq KCL PO and notify MD/NP
- o Serum potassium 3.6 to 3.9mEq/L, give 40mEq KCL IV or PO
- o Serum potassium 4 mEq/L or greater, do not give potassium replacement

potassium chloride 20 mEq in 100 mL IVPB (FOR CENTRAL LINE ONLY)

Dose: 20 mEq Route: intravenous every 1 hour prn over 60 Minutes for 2 doses
Start: S

potassium chloride (KLOR-CON) packet 40 mEq

Dose: 40 mEq Route: oral once PRN
Start: S

Instructions:

Dissolve contents of each packet in 4 oz. of water or other beverage.

Electrolyte Replacement

TREATMENT CONDITIONS 40

Interval: -- Occurrences: --
 Comments: Magnesium (Normal range 1.6 to 2.6mEq/L)

- o Serum Magnesium less than 1.1mEq/L, Call MD/NP
- o Serum Magnesium 1.2 to 1.5mEq/L, give 4 gram magnesium sulfate IV
- o Serum Magnesium 1.6 to 1.9mEq/L, give 2 gram magnesium sulfate IV
- o Serum Magnesium 2 mEq/L or greater, do not give magnesium replacement

magnesium sulfate 2 g/50 mL IVPB (premix)

Dose: 2 g Route: intravenous once PRN @ 25 mL/hr over 1 Hours
Start: S

magnesium sulfate 4 g IVPB (premix)

Dose: 4 g Route: intravenous once PRN over 2 Hours
Start: S

Hematology & Oncology Hypersensitivity Reaction Standing Order

ONC NURSING COMMUNICATION 82

Interval: --
Comments:

Occurrences: --
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 4

Interval: --
Comments:

Occurrences: --
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 83

Interval: --
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 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.

Days 2,3,4,5

Perform every 1 day x4

Appointment Requests

INFUSION APPOINTMENT REQUEST

Interval: -- Occurrences: --

Labs

CBC WITH PLATELET AND DIFFERENTIAL

Interval: -- Occurrences: --

COMPREHENSIVE METABOLIC PANEL

Interval: -- Occurrences: --

MAGNESIUM LEVEL

Interval: -- Occurrences: --

LDH

Interval: -- Occurrences: --

URIC ACID LEVEL

Interval: -- Occurrences: --

Nursing Orders

ONC PROVIDER COMMUNICATION 10

Interval: -- Occurrences: --

Comments: Please verify that patient is taking oral chemotherapy (Tretinoin) as directed by physician.

Nursing Orders

ONC NURSING COMMUNICATION 67

Interval: -- Occurrences: --

Comments: Supplement to maintain magnesium GREATER than 2 and potassium GREATER than 4. Refer to Potassium Replacement Scale.

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) 16 mg, dexamethasone

(DECADRON) 12 mg in sodium chloride 0.9%

50 mL IVPB

Dose: -- Route: intravenous once over 15 Minutes for 1 dose

Start: S

Ingredients:

Name	Type	Dose	Selected	Adds Vol.
ONDANSETRON HCL (PF) 4 MG/2 ML INJECTION SOLUTION	Medications	16 mg	Yes	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	Base		No	Yes

SOLUTION

ondansetron (ZOFTRAN) tablet 16 mg

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

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 once over 30 Minutes for 1 dose
Start: S End: S

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	APREPITANT 7.2 MG/ML INTRAVENOUS EMULSION	Medications	130 mg	Main Ingredient	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

Chemotherapy

arsenic trioxide (TRISENOX) 0.15 mg/kg in sodium chloride 0.9% 250 mL chemo IVPB

Dose: 0.15 mg/kg Route: intravenous once over 2 Hours for 1 dose
Offset: 30 Minutes

Instructions:

This drug requires close monitoring of electrolytes. Check electrolytes twice weekly and supplement to keep magnesium greater than 2 and potassium greater than 4.

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	ARSENIC TRIOXIDE 2 MG/ML INTRAVENOUS SOLUTION	Medications	0.15 mg/kg	Main Ingredient	Yes
	SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	QS Base	250 mL	Yes	Yes
	DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	QS Base	250 mL	No	Yes

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.

Day 8

Perform every 1 day x1

Appointment Requests

INFUSION APPOINTMENT REQUEST

Interval: -- Occurrences: --

Labs

CBC WITH PLATELET AND DIFFERENTIAL

Interval: -- Occurrences: --

COMPREHENSIVE METABOLIC PANEL

Interval: -- Occurrences: --

MAGNESIUM LEVEL

Interval: -- Occurrences: --

LDH

Interval: -- Occurrences: --

URIC ACID LEVEL

Interval: -- Occurrences: --

Labs

ECG 12-LEAD

Interval: -- Occurrences: --

Provider Communication

ONC NURSING COMMUNICATION 67

Interval: -- Occurrences: --

Comments: Order EKG at baseline, then weekly. Prolonged QT is greater than or equal to 500 milliseconds (11 boxes).

Nursing Orders

ONC PROVIDER COMMUNICATION 10

Interval: -- Occurrences: --

Comments: Please verify that patient is taking oral chemotherapy (Tretinoin) as directed by physician.

Nursing Orders

ONC NURSING COMMUNICATION 67

Interval: -- Occurrences: --

Comments: Supplement to maintain magnesium GREATER than 2 and potassium GREATER than 4. Refer to Potassium Replacement Scale.

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 (ZOFRAN) 16 mg, dexamethasone

(DECADRON) 12 mg in sodium chloride 0.9%

50 mL IVPB

Dose: -- Route: intravenous once over 15 Minutes for 1 dose

Start: S

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	ONDANSETRON HCL (PF) 4 MG/2 ML INJECTION SOLUTION	Medications	16 mg	Yes	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 (ZOFTRAN) tablet 16 mg

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

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 once over 30 Minutes for 1 dose
Start: S End: S

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	APREPITANT 7.2 MG/ML INTRAVENOUS EMULSION	Medications	130 mg	Main Ingredient	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

Chemotherapy

arsenic trioxide (TRISENOX) 0.15 mg/kg in sodium chloride 0.9% 250 mL chemo IVPB

Dose: 0.15 mg/kg Route: intravenous once over 2 Hours for 1 dose
Offset: 30 Minutes

Instructions:

This drug requires close monitoring of electrolytes. Check electrolytes twice weekly and supplement to keep magnesium greater than 2 and potassium greater than 4.

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	ARSENIC TRIOXIDE 2 MG/ML INTRAVENOUS SOLUTION	Medications	0.15 mg/kg	Main Ingredient	Yes
	SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	QS Base	250 mL	Yes	Yes

DEXTROSE 5 % IN QS Base 250 mL No Yes
WATER (D5W)
INTRAVENOUS
SOLUTION

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.

Days 9,10,11,12

Perform every 1 day x4

Appointment Requests

INFUSION APPOINTMENT REQUEST

Interval: -- Occurrences: --

Labs

CBC WITH PLATELET AND DIFFERENTIAL

Interval: -- Occurrences: --

COMPREHENSIVE METABOLIC PANEL

Interval: -- Occurrences: --

MAGNESIUM LEVEL

Interval: -- Occurrences: --

LDH

Interval: -- Occurrences: --

URIC ACID LEVEL

Interval: -- Occurrences: --

Nursing Orders

ONC PROVIDER COMMUNICATION 10

Interval: -- Occurrences: --

Comments: Please verify that patient is taking oral chemotherapy (Tretinoin) as directed by physician.

Nursing Orders

ONC NURSING COMMUNICATION 67

Interval: -- Occurrences: --

Comments: Supplement to maintain magnesium GREATER than 2 and potassium GREATER than 4. Refer to Potassium Replacement Scale.

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) 16 mg, dexamethasone (DECADRON) 12 mg in sodium chloride 0.9% 50 mL IVPB**
 Dose: -- Route: intravenous once over 15 Minutes for 1 dose
 Start: S

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	ONDANSETRON HCL (PF) 4 MG/2 ML INJECTION SOLUTION	Medications	16 mg	Yes	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 (ZOFTRAN) tablet 16 mg**
 Dose: 16 mg Route: oral once for 1 dose
 Start: S

- 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 once over 30 Minutes for 1 dose
 Start: S End: S

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	APREPITANT 7.2 MG/ML INTRAVENOUS EMULSION	Medications	130 mg	Main Ingredient	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

Chemotherapy

- arsenic trioxide (TRISENOX) 0.15 mg/kg in sodium chloride 0.9% 250 mL chemo IVPB**
 Dose: 0.15 mg/kg Route: intravenous once over 2 Hours for 1 dose
 Offset: 30 Minutes

Instructions:
 This drug requires close monitoring of electrolytes. Check electrolytes twice weekly and supplement to keep magnesium greater than 2 and potassium greater than 4.

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	ARSENIC TRIOXIDE 2 MG/ML	Medications	0.15 mg/kg	Main Ingredient	Yes

INTRAVENOUS SOLUTION SODIUM CHLORIDE 0.9 %	QS Base	250 mL	Yes	Yes
INTRAVENOUS SOLUTION DEXTROSE 5 % IN WATER (D5W)	QS Base	250 mL	No	Yes

Electrolyte Replacement

TREATMENT CONDITIONS 39

Interval: -- Occurrences: --
 Comments: Potassium (Normal range 3.5 to 5.0mEq/L)

- o Serum potassium less than 2.9mEq/L, Call MD/NP
- o Serum potassium 3.0 to 3.5mEq/L, give 40mEq KCL IV and 40mEq KCL PO and notify MD/NP
- o Serum potassium 3.6 to 3.9mEq/L, give 40mEq KCL IV or PO
- o Serum potassium 4 mEq/L or greater, do not give potassium replacement

potassium chloride 20 mEq in 100 mL IVPB (FOR CENTRAL LINE ONLY)

Dose: 20 mEq Route: intravenous every 1 hour prn over 60 Minutes for 2 doses
 Start: S

potassium chloride (KLOR-CON) packet 40 mEq

Dose: 40 mEq Route: oral once PRN
 Start: S
 Instructions:
 Dissolve contents of each packet in 4 oz. of water or other beverage.

Electrolyte Replacement

TREATMENT CONDITIONS 40

Interval: -- Occurrences: --
 Comments: Magnesium (Normal range 1.6 to 2.6mEq/L)

- o Serum Magnesium less than 1.1mEq/L, Call MD/NP
- o Serum Magnesium 1.2 to 1.5mEq/L, give 4 gram magnesium sulfate IV
- o Serum Magnesium 1.6 to 1.9mEq/L, give 2 gram magnesium sulfate IV
- o Serum Magnesium 2 mEq/L or greater, do not give magnesium replacement

magnesium sulfate 2 g/50 mL IVPB (premix)

Dose: 2 g Route: intravenous once PRN @ 25 mL/hr over 1 Hours
 Start: S

magnesium sulfate 4 g IVPB (premix)

Dose: 4 g Route: intravenous once PRN over 2 Hours
 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.

Day 15

Perform every 1 day x1

Appointment Requests

INFUSION APPOINTMENT REQUEST

Interval: -- Occurrences: --

Labs

CBC WITH PLATELET AND DIFFERENTIAL

Interval: -- Occurrences: --

COMPREHENSIVE METABOLIC PANEL

Interval: -- Occurrences: --

MAGNESIUM LEVEL

Interval: -- Occurrences: --

LDH

Interval: -- Occurrences: --

URIC ACID LEVEL

Interval: -- Occurrences: --

Labs

ECG 12-LEAD

Interval: -- Occurrences: --

Provider Communication

ONC NURSING COMMUNICATION 67

Interval: -- Occurrences: --

Comments: Order EKG at baseline, then weekly. Prolonged QT is greater than or equal to 500 milliseconds (11 boxes).

Nursing Orders

ONC NURSING COMMUNICATION 67

Interval: -- Occurrences: --

Comments: Supplement to maintain magnesium GREATER than 2 and potassium GREATER than 4. Refer to Potassium Replacement Scale.

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) 16 mg, dexamethasone

(DECADRON) 12 mg in sodium chloride 0.9%

50 mL IVPB

Dose: -- Route: intravenous once over 15 Minutes for 1 dose

Start: S

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

DEXAMETHASONE Medications	12 mg	Yes	No
4 MG/ML INJECTION SOLUTION			
SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	Base 50 mL	Always	Yes
DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	Base	No	Yes

ondansetron (ZOFRAN) tablet 16 mg

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

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 once over 30 Minutes for 1 dose
Start: S End: S

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	APREPITANT 7.2 MG/ML INTRAVENOUS EMULSION	Medications	130 mg	Main Ingredient	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

Chemotherapy

arsenic trioxide (TRISENOX) 0.15 mg/kg in sodium chloride 0.9% 250 mL chemo IVPB

Dose: 0.15 mg/kg Route: intravenous once over 2 Hours for 1 dose
Offset: 30 Minutes

Instructions:

This drug requires close monitoring of electrolytes. Check electrolytes twice weekly and supplement to keep magnesium greater than 2 and potassium greater than 4.

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	ARSENIC TRIOXIDE 2 MG/ML INTRAVENOUS SOLUTION	Medications	0.15 mg/kg	Main Ingredient	Yes
	SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	QS Base	250 mL	Yes	Yes
	DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	QS Base	250 mL	No	Yes

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.

Days 16,17,18,19

Perform every 1 day x4

Appointment Requests

INFUSION APPOINTMENT REQUEST
Interval: -- Occurrences: --

Labs

CBC WITH PLATELET AND DIFFERENTIAL
Interval: -- Occurrences: --

COMPREHENSIVE METABOLIC PANEL
Interval: -- Occurrences: --

MAGNESIUM LEVEL
Interval: -- Occurrences: --

LDH
Interval: -- Occurrences: --

URIC ACID LEVEL
Interval: -- Occurrences: --

Nursing Orders

ONC NURSING COMMUNICATION 67
Interval: -- Occurrences: --
Comments: Supplement to maintain magnesium GREATER than 2 and potassium GREATER than 4. Refer to Potassium Replacement Scale.

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) 16 mg, dexamethasone (DECADRON) 12 mg in sodium chloride 0.9% 50 mL IVPB
Dose: -- Route: intravenous once over 15 Minutes for 1 dose
Start: S

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

DEXAMETHASONE Medications	12 mg	Yes	No
4 MG/ML INJECTION SOLUTION			
SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	Base 50 mL	Always	Yes
DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	Base	No	Yes

ondansetron (ZOFTRAN) tablet 16 mg

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

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 once over 30 Minutes for 1 dose
Start: S End: S

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	APREPITANT 7.2 MG/ML INTRAVENOUS EMULSION	Medications	130 mg	Main Ingredient	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

Chemotherapy

arsenic trioxide (TRISENOX) 0.15 mg/kg in sodium chloride 0.9% 250 mL chemo IVPB

Dose: 0.15 mg/kg Route: intravenous once over 2 Hours for 1 dose
Offset: 30 Minutes

Instructions:

This drug requires close monitoring of electrolytes. Check electrolytes twice weekly and supplement to keep magnesium greater than 2 and potassium greater than 4.

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	ARSENIC TRIOXIDE 2 MG/ML INTRAVENOUS SOLUTION	Medications	0.15 mg/kg	Main Ingredient	Yes
	SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	QS Base	250 mL	Yes	Yes
	DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	QS Base	250 mL	No	Yes

Electrolyte Replacement

TREATMENT CONDITIONS 39

Interval: -- Occurrences: --
 Comments: Potassium (Normal range 3.5 to 5.0mEq/L)
 o Serum potassium less than 2.9mEq/L, Call MD/NP
 o Serum potassium 3.0 to 3.5mEq/L, give 40mEq KCL IV and 40mEq KCL PO and notify MD/NP
 o Serum potassium 3.6 to 3.9mEq/L, give 40mEq KCL IV or PO
 o Serum potassium 4 mEq/L or greater, do not give potassium replacement

potassium chloride 20 mEq in 100 mL IVPB (FOR CENTRAL LINE ONLY)

Dose: 20 mEq Route: intravenous every 1 hour prn over 60 Minutes for 2 doses
 Start: S

potassium chloride (KLOR-CON) packet 40 mEq

Dose: 40 mEq Route: oral once PRN
 Start: S
 Instructions:
 Dissolve contents of each packet in 4 oz. of water or other beverage.

Electrolyte Replacement

TREATMENT CONDITIONS 40

Interval: -- Occurrences: --
 Comments: Magnesium (Normal range 1.6 to 2.6mEq/L)
 o Serum Magnesium less than 1.1mEq/L, Call MD/NP
 o Serum Magnesium 1.2 to 1.5mEq/L, give 4 gram magnesium sulfate IV
 o Serum Magnesium 1.6 to 1.9mEq/L, give 2 gram magnesium sulfate IV
 o Serum Magnesium 2 mEq/L or greater, do not give magnesium replacement

magnesium sulfate 2 g/50 mL IVPB (premix)

Dose: 2 g Route: intravenous once PRN @ 25 mL/hr over 1 Hours
 Start: S

magnesium sulfate 4 g IVPB (premix)

Dose: 4 g Route: intravenous once PRN over 2 Hours
 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.

Day 22

Perform every 1 day x1

Appointment Requests

INFUSION APPOINTMENT REQUEST

Interval: -- Occurrences: --

Labs

CBC WITH PLATELET AND DIFFERENTIAL

Interval: -- Occurrences: --

COMPREHENSIVE METABOLIC PANEL

Interval: -- Occurrences: --

MAGNESIUM LEVEL

Interval: -- Occurrences: --

LDH

Interval: -- Occurrences: --

URIC ACID LEVEL

Interval: -- Occurrences: --

Labs

ECG 12-LEAD

Interval: -- Occurrences: --

Provider Communication

ONC NURSING COMMUNICATION 67

Interval: -- Occurrences: --

Comments: Order EKG at baseline, then weekly. Prolonged QT is greater than or equal to 500 milliseconds (11 boxes).

Nursing Orders

ONC NURSING COMMUNICATION 67

Interval: -- Occurrences: --

Comments: Supplement to maintain magnesium GREATER than 2 and potassium GREATER than 4. Refer to Potassium Replacement Scale.

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 (ZOFRAN) 16 mg, dexamethasone (DECADRON) 12 mg in sodium chloride 0.9% 50 mL IVPB

Dose: -- Route: intravenous once over 15 Minutes for 1 dose
Start: S

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	ONDANSETRON HCL (PF) 4 MG/2 ML INJECTION SOLUTION	Medications	16 mg	Yes	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 Base No Yes
 WATER (D5W)
 INTRAVENOUS
 SOLUTION

ondansetron (ZOFTRAN) tablet 16 mg

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

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 once over 30 Minutes for 1 dose
 Start: S End: S

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	APREPITANT 7.2 MG/ML	Medications	130 mg	Main Ingredient	Yes
	INTRAVENOUS EMULSION				
	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

Chemotherapy

arsenic trioxide (TRISENOX) 0.15 mg/kg in sodium chloride 0.9% 250 mL chemo IVPB

Dose: 0.15 mg/kg Route: intravenous once over 2 Hours for 1 dose
 Offset: 30 Minutes

Instructions:

This drug requires close monitoring of electrolytes. Check electrolytes twice weekly and supplement to keep magnesium greater than 2 and potassium greater than 4.

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	ARSENIC TRIOXIDE 2 MG/ML	Medications	0.15 mg/kg	Main Ingredient	Yes
	INTRAVENOUS SOLUTION				
	SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	QS Base	250 mL	Yes	Yes
	DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	QS Base	250 mL	No	Yes

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.

Days 23,24,25,26

Perform every 1 day x4

Appointment Requests

INFUSION APPOINTMENT REQUEST

Interval: -- Occurrences: --

Labs

CBC WITH PLATELET AND DIFFERENTIAL

Interval: -- Occurrences: --

COMPREHENSIVE METABOLIC PANEL

Interval: -- Occurrences: --

MAGNESIUM LEVEL

Interval: -- Occurrences: --

LDH

Interval: -- Occurrences: --

URIC ACID LEVEL

Interval: -- Occurrences: --

Nursing Orders

ONC NURSING COMMUNICATION 67

Interval: -- Occurrences: --

Comments: Supplement to maintain magnesium GREATER than 2 and potassium GREATER than 4. Refer to Potassium Replacement Scale.

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) 16 mg, dexamethasone (DECADRON) 12 mg in sodium chloride 0.9% 50 mL IVPB

Dose: -- Route: intravenous once over 15 Minutes for 1 dose
 Start: S

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	ONDANSETRON HCL (PF) 4 MG/2 ML INJECTION SOLUTION	Medications	16 mg	Yes	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 Base No Yes
 WATER (D5W)
 INTRAVENOUS
 SOLUTION

ondansetron (ZOFTRAN) tablet 16 mg

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

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 once over 30 Minutes for 1 dose
 Start: S End: S

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	APREPITANT 7.2 MG/ML INTRAVENOUS EMULSION	Medications	130 mg	Main Ingredient	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

Chemotherapy

arsenic trioxide (TRISENOX) 0.15 mg/kg in sodium chloride 0.9% 250 mL chemo IVPB

Dose: 0.15 mg/kg Route: intravenous once over 2 Hours for 1 dose
 Offset: 30 Minutes

Instructions:

This drug requires close monitoring of electrolytes. Check electrolytes twice weekly and supplement to keep magnesium greater than 2 and potassium greater than 4.

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	ARSENIC TRIOXIDE 2 MG/ML INTRAVENOUS SOLUTION	Medications	0.15 mg/kg	Main Ingredient	Yes
	SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	QS Base	250 mL	Yes	Yes
	DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	QS Base	250 mL	No	Yes

Electrolyte Replacement

TREATMENT CONDITIONS 39

Interval: --

Occurrences: --

Comments:

Potassium (Normal range 3.5 to 5.0mEq/L)

- o Serum potassium less than 2.9mEq/L, Call MD/NP
- o Serum potassium 3.0 to 3.5mEq/L, give 40mEq KCL IV and 40mEq KCL PO and notify MD/NP
- o Serum potassium 3.6 to 3.9mEq/L, give 40mEq KCL IV or PO

o Serum potassium 4 mEq/L or greater, do not give potassium replacement

potassium chloride 20 mEq in 100 mL IVPB (FOR CENTRAL LINE ONLY)

Dose: 20 mEq Route: intravenous every 1 hour prn over 60 Minutes for 2 doses
Start: S

potassium chloride (KLOR-CON) packet 40 mEq

Dose: 40 mEq Route: oral once PRN
Start: S

Instructions:

Dissolve contents of each packet in 4 oz. of water or other beverage.

Electrolyte Replacement

TREATMENT CONDITIONS 40

Interval: --

Occurrences: --

Comments:

Magnesium (Normal range 1.6 to 2.6mEq/L)

- o Serum Magnesium less than 1.1mEq/L, Call MD/NP
- o Serum Magnesium 1.2 to 1.5mEq/L, give 4 gram magnesium sulfate IV
- o Serum Magnesium 1.6 to 1.9mEq/L, give 2 gram magnesium sulfate IV
- o Serum Magnesium 2 mEq/L or greater, do not give magnesium replacement

magnesium sulfate 2 g/50 mL IVPB (premix)

Dose: 2 g Route: intravenous once PRN @ 25 mL/hr over 1 Hours
Start: S

magnesium sulfate 4 g IVPB (premix)

Dose: 4 g Route: intravenous once PRN over 2 Hours
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.