

OP PENTOSTATIN

Types: ONCOLOGY TREATMENT

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

Take-Home Medications Repeat 1 time Cycle length: 1 day

Day 1 Perform every 1 day x1

Take-Home Medications Prior to Treatment

sulfamethoxazole-trimethoprim (BACTRIM SS)

400-80 mg per tablet

Dose: -- Route: oral

Dispense: -- Refills: --

Start: S

Comments:

For infection prevention.

Instructions:

For infection prevention.

Take-Home Medications Prior to Treatment

acyclovir (ZOVIRAX) 800 MG tablet

Dose: -- Route: oral

Dispense: -- Refills: --

Start: S

Comments:

For infection prevention.

Instructions:

For infection prevention.

Cycles 1 to 12 Repeat 12 times Cycle length: 14 days

Day 1 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: --

Outpatient Electrolyte Replacement Protocol

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Interval: -- Occurrences: --

Comments:

Potassium (Normal range 3.5 to 5.0mEq/L)

o Protocol applies for SCr less than 1.5. Otherwise, contact MD/NP

o Protocol applies only to same day lab value.

o Serum potassium less than 3.0mEq/L, give 40mEq KCL IV or PO and contact MD/NP

o Serum potassium 3.0 to 3.2mEq/L, give 40mEq KCL IV or PO

- o Serum potassium 3.3 to 3.4mEq/L, give 20mEq KCL IV or PO
- o Serum potassium 3.5 mEq/L or greater, do not give potassium replacement
- o If patient meets criteria, order SmartSet called "Outpatient Electrolyte Replacement"
- o Sign electrolyte replacement order as Per protocol: cosign required

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- Interval: -- Occurrences: --
 Comments: Magnesium (Normal range 1.6 to 2.6mEq/L)
- o Protocol applies for SCr less than 1.5. Otherwise, contact MD/NP
 - o Protocol applies only to same day lab value.
 - o Serum Magnesium less than 1.0mEq/L, give 2 gram magnesium sulfate IV and contact MD/NP
 - o Serum Magnesium 1.0 to 1.2mEq/L, give 2 gram magnesium sulfate IV
 - o Serum Magnesium 1.3 to 1.5mEq/L, give 1 gram magnesium sulfate IV
 - o Serum Magnesium 1.6 mEq/L or greater, do not give magnesium replacement
 - o If patient meets criteria, order SmartSet called "Outpatient Electrolyte Replacement"
 - o Sign electrolyte replacement order as Per protocol: cosign required

Nursing Orders

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- Interval: -- Occurrences: --
 Comments: HOLD and notify provider if ANC LESS than 200.

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 1,000 mL
 Dose: 1,000 mL Route: intravenous once @ 500 mL/hr for 1 dose

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	Yes
				Ingredient	

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

Post-Hydration

sodium chloride 0.9 % infusion 1,000 mL

Dose: 1,000 mL Route: intravenous once @ 500 mL/hr for 1 dose
Offset: 1 Hours

Instructions:
Following chemotherapy.

Discharge Nursing Orders

ONC NURSING COMMUNICATION 76

Interval: -- Occurrences: --
Comments: Discontinue IV.

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.