

OP TRASTUZUMAB / LAPATINIB (CYCLE 2 AND BEYOND-WEEKLY)

Types: ONCOLOGY TREATMENT

Synonyms: TRAS, TRASTUZUMAB, HERCEPTIN, LAPA, TYKER, HER, BREAST

Take-Home Medications		Repeat 1 time	Cycle length: 1 day
Day 1		Perform every 1 day x1	
Take-Home Medications Prior to Treatment			
lapatinib (TYKERB) 250 mg chemo tablet			
Dose: 1,000 mg		Route: oral	daily
Dispense: --		Refills: --	
Start: S			
Cycles 2 to 5		Repeat 4 times	Cycle length: 21 days
Day 1		Perform every 1 day x1	
Appointment Requests			
INFUSION APPOINTMENT REQUEST			
Interval: --		Occurrences: --	
Labs			
☒ COMPREHENSIVE METABOLIC PANEL			
Interval: --		Occurrences: --	
☒ CBC WITH PLATELET AND DIFFERENTIAL			
Interval: --		Occurrences: --	
☒ MAGNESIUM LEVEL			
Interval: --		Occurrences: --	
☐ URINALYSIS, AUTOMATED WITH MICROSCOPY			
Interval: --		Occurrences: --	
☐ CANCER ANTIGEN 27-29 (CA BR)			
Interval: --		Occurrences: --	
Outpatient Electrolyte Replacement Protocol			
TREATMENT CONDITIONS 39			
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	
TREATMENT CONDITIONS 40			
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

ONC NURSING COMMUNICATION 15

Interval: -- Occurrences: --
 Comments: Verify that the patient has taken appropriate oral chemotherapy medication from home prescription.

Provider Communication

ONC PROVIDER COMMUNICATION

Interval: -- Occurrences: --
 Comments: Verify Ejection Fraction prior to Cycle 1. Ejection Fraction: ***% on *** (date).

If patient has not had a recent MUGA or ECHO, order one via order entry. A baseline cardiac evaluation with a MUGA scan or an ECHO is recommended, especially in patients with risk factors for increased cardiac toxicity. Repeated MUGA or ECHO determinations of LVEF should be performed, particularly with higher, cumulative anthracycline doses.

Nursing Orders

TREATMENT CONDITIONS 7

Interval: -- Occurrences: --
 Comments: HOLD and notify provider if ANC LESS than 1000; Platelets LESS than 100,000.

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

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

Dose: 25 mg Route: intravenous once for 1 dose
 Start: S
 Instructions: Administer via slow IV push 30 minutes prior to chemotherapy.

☐ **diphenhydramine (BENADRYL) 50 mg in sodium chloride 0.9 % 50 mL IVPB**

Dose: 50 mg Route: intravenous once over 15 Minutes for 1 dose

Start: S End: S 11:45 AM

Instructions:

Administer 30 minutes prior to chemotherapy.

Ingredients:	Name	Type	Dose	Selected	Adds Vol.
	DIPHENHYDRAMIN E 50 MG/ML INJECTION SOLUTION	Medications	50 mg	Main Ingredient	No
	SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	Base	50 mL	Yes	Yes
	DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	Base	50 mL	No	Yes

☐ **diphenhydrAMINE (BENADRYL) tablet 25 mg**

Dose: 25 mg

Route: oral

once for 1 dose

Offset: 0 Hours

Instructions:

Administer 30 minutes prior to chemotherapy.

☐ **diphenhydrAMINE (BENADRYL) tablet 50 mg**

Dose: 50 mg

Route: oral

once for 1 dose

Offset: 0 Hours

Instructions:

Administer 30 minutes prior to chemotherapy.

☐ **famotidine (PEPCID) 20 mg/2 mL injection 20 mg**

Dose: 20 mg

Route: intravenous

once for 1 dose

Offset: 0 Hours

Instructions:

Administer 30 minutes prior to chemotherapy.

☐ **famotidine (PEPCID) tablet 20 mg**

Dose: 20 mg

Route: oral

once for 1 dose

Offset: 0 Hours

Instructions:

Administer 30 minutes prior to chemotherapy.

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

Dose: 650 mg

Route: oral

once for 1 dose

Offset: 0 Hours

Instructions:

Administer 30 minutes prior to chemotherapy.

Supportive Care

☐ **LORAZepam (ATIVAN) injection 1 mg**

Dose: 1 mg

Route: intravenous

once PRN

Start: S

☐ **LORAZepam (ATIVAN) tablet 1 mg**

Dose: 1 mg

Route: oral

once PRN

Start: S

Antiemetics

☐ **promethazine (PHENERGAN) injection 12.5 mg**

Dose: 12.5 mg

Route: injection

once PRN

Start: S

Chemotherapy

trastuzumab (HERCEPTIN) 6 mg/kg in sodium chloride 0.9 % 250 mL chemo IVPB

Dose: 6 mg/kg

Route: intravenous

once over 30 Minutes for 1 dose

Instructions:

NOT compatible with D5W.

Ingredients:

Name

Type

Dose

Selected

Adds Vol.

TRASTUZUMAB
150 MG

Medications

6 mg/kg

Main
Ingredient

INTRAVENOUS
SOLUTION

SODIUM
CHLORIDE 0.9 %

QS Base

250 mL

Yes

Yes

INTRAVENOUS
SOLUTION

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.