

**Nursing Orders**

	Interval	Defer Until	Duration
<input type="checkbox"/> Ensure patient has been vaccinated against meningitis Details	Every visit	S	Until discont'd
<input type="checkbox"/> Insert Peripheral IV or Access Portacath Details	Every visit	S	Until discont'd
<input type="checkbox"/> Vital signs - T/P/R/BP Per Unit Protocol At start of infusion: obtain vital signs every 15 minutes x 4, then every 30 minutes.	Every visit	S	Until discont'd
<input type="checkbox"/> Nursing communication: Monitor patient for any signs of MINOR INFUSION REACTION Monitor patient for any signs of infusion reaction. For MINOR INFUSION REACTIONS (fever, chills, pruritis, urticaria, chest pain, mild hypotension, hypertension, or mild dyspnea) stop or slow infusion rate by 50%. If symptoms do not resolve within 5-10 minutes give Benadryl as ordered. Notify MD if symptoms do not resolve within 5-10 minutes. With MD approval, give Solu-medrol as ordered. When symptoms resolve, restart medication at 25% of the original rate. After 15-30 minutes gently increase rate and monitor patient closely until completion.	Every visit	S	Until discont'd
<input type="checkbox"/> Nursing communication: Monitor patient for signs of SEVERE INFUSION REACTION Monitor patient for signs of SEVERE INFUSION REACTION: severe dyspnea, wheezing, stridor, angioedema, or marked hypotension. For severe infusion reaction take the following steps; STOP Infusion and start Normal Saline solution, Notify physician and administer Benadryl as ordered, Monitor vital signs, Administer Epinephrine as ordered. Consult MD for further orders.	Every visit	S	Until discont'd
<input type="checkbox"/> sodium chloride 0.9% flush 10 mL 10 mL, intravenous, PRN, line care, Starting S, For 10 Doses	Every visit	S	Until discont'd
<input type="checkbox"/> HEParin, porcine (PF) 100 unit/mL injection 500 Units 500 Units, intra-catheter, once, Starting S, For 1 Doses ONLY IF PATIENT HAS PORTACATH: Flush portacath before removing needle from portacath.	Every visit	S	Until discont'd
<input type="checkbox"/> sodium chloride 0.9% infusion 250 mL 250 mL, intravenous, at 30 mL/hr, PRN, Flush bag, Starting S	Every visit	S	Until discont'd
<input type="checkbox"/> Discontinue IV Details	Every visit	S	Until discont'd

**Medications**

	Interval	Defer Until	Duration
<input type="checkbox"/> eculizumab (SOLIRIS) infusion (RESTRICTED) 600 mg 600 mg, intravenous, once, Starting S, For 1 Doses Induction: 600 mg weekly for 4 doses. This medication is restricted to attending-level physicians enrolled in the Soliris® REMS program. Are you an attending-level provider enrolled in the Soliris® REMS program or ordering on behalf of one?	1 time a week	S	4 treatments
<input type="checkbox"/> eculizumab (SOLIRIS) infusion (RESTRICTED) 900 mg 900 mg, intravenous, once, Starting S, For 1 Doses Maintenance: 900 mg at week 5, then 900 mg every 2 weeks. This medication is restricted to attending-level physicians enrolled in the Soliris® REMS program. Are you an attending-level provider enrolled in the Soliris® REMS program or ordering on behalf of one?	Every 2 weeks	S+34	Until discont'd

**Hypersensitivity**

	Interval	Defer Until	Duration
<input type="checkbox"/> acetaminophen (TYLENOL) tablet 650 mg 650 mg, oral, every 6 hours PRN, mild pain (score 1-3), headaches, fever, Starting S	PRN	S	Until discont'd
<input type="checkbox"/> diphenhydrAMINE (BENADRYL) injection 25 mg 25 mg, intravenous, once PRN, itching, for mild to moderate infusion reaction, Starting S, For 1 Doses	PRN	S	Until discont'd
<input type="checkbox"/> diphenhydrAMINE (BENADRYL) injection 50 mg 50 mg, intravenous, once PRN, itching, for severe infusion reaction, Starting S, For 1 Doses	PRN	S	Until discont'd
<input type="checkbox"/> epINEPHrine (ADRENALIN) 1 mg/1 mL injection 0.5 mg 0.5 mL, subcutaneous, once PRN, anaphylaxis, Starting S, For 1 Doses	PRN	S	Until discont'd
<input type="checkbox"/> methylPREDNISolone sodium succinate (Solu-MEDROL) injection 40 mg 40 mg, intravenous, once PRN, for infusion reaction, Starting S, For 1 Doses	PRN	S	Until discont'd

	Interval	Defer Until	Duration
<input type="checkbox"/> ondansetron (ZOFRAN) injection 4 mg 4 mg, intravenous, once PRN, nausea, vomiting, Starting S, For 1 Doses	PRN	S	Until discontinuation
<input type="checkbox"/> promethazine (PHENERGAN) tablet 25 mg 25 mg, oral, every 6 hours PRN, nausea, vomiting, Starting S	PRN	S	Until discontinuation
<input type="checkbox"/> sodium chloride 0.9% infusion 250 mL 250 mL, intravenous, once PRN, Hydration, Starting S, For 1 Doses	PRN	S	Until discontinuation