

Information on this form is a guide only. User will be solely responsible for verifying its currency and accuracy with the corresponding BC Cancer treatment protocols located at <a href="https://www.bccancer.bc.ca">www.bccancer.bc.ca</a> and according to acceptable standards of care

## PROTOCOL CODE: SCDRUGRX - PPO A

Preprinted Order A: Immediate management of infusion-related reaction and resumption of infusion

Page 1 of 1

DOCTOR'S ORDERS			
DATE:	TIME:	Су	cle #:
Infusion-Related Reaction Management: Stop infusion and administer the following:			
☐ diphenhydrAMINE 50 mg IV		☐ epinephrine 0.5 mg* IM STAT	
hydrocortisone sodium succinate	hydrocortisone sodium succinate 100 mg IV salbutamol 100 mcg inhaler, 2 puffs via aerosol hamber		Repeat at 5 minute intervals twice more as needed *Note: epinephrine 1:1,000 = 1 mg/mL and epinephrine 1:10,000 = 1 mg/10 mL
☐ salbutamol 100 mcg inhaler, 2 pt chamber			**
☐ ipratropium 20 mcg/salbutamol 100 mcg (COMBIVENT RESPIMAT) inhaler, 1 puff via aerosol chamber			
☐ ipratropium 20 mcg inhaler, 2 pur chamber	ffs via aerosol	ipratropium 0.5 mg via nebulize	er**
** See Procedure: Application of COVID-19 Personal Protective Equipment (PPE) Framework for BC Cancer			
Others:			
SCDRUGRX: Use for drugs/protocols with no specific infusion reaction guidelines  Resume (indicate drug name) infusion at 25% OR% of the rate at which the reaction occurred and titrate as per SCDRUGRX or cap rate at once symptoms of reaction have subsided  • 25% of the rate at time of reaction for 5 minutes, then  • 50% of the rate at time of reaction for 5 minutes, then  • 75% of the rate at time of reaction for 5 minutes, then  • 100% of the rate at time of reaction			
SPECIFIC PROTOCOL: Refer to protocol by which the patient is being treated for infusion reaction guidelines  Resume (indicate drug name) at (rate) as per patient's treatment protocol.			
Resume PACLitaxel infusion at 20 mL/h for 5 minutes, 30 mL/h for 5 minutes, 40 mL/h for 5 minutes, then 60 mL/h for 5 minutes. If no reaction, increase to full rate.			
Resume DOCEtaxel infusion at 30 mL/h x 5 minutes, then 60 mL/h x 5 minutes, then 120 mL/h x 5 minutes, then complete infusion at 250 mL/h (for 500 mL bag, continue 250 mL/h for 5 minutes, then complete infusion at 500 mL/h).			
Resume riTUXimab at (one infusion rate below the rate at which the reaction occurred) and continue with escalation of infusion rates as per protocol.			
Resume daratumumab at (half the infusion rate at which the reaction occurred) and continue with escalation of infusion rates as per protocol.			
☐ DO NOT resume infusion			
SPECIFIC GUIDELINES: Physician to provide specific orders for resuming infusion			
DOCTOR'S SIGNATURE:			SIGNATURE:
			RN or UC: