

APHERESIS: HPC ALLOGENEIC COLLECTION

Apheresis Therapy Plan for Allogeneic Collection

Protocol Types

Apheresis Therapy BMT

Patient name: _____ DOB: _____

Please include: ☐ Patient face sheet ☐ Insurance authorization (if other than Medicaid or non-Advantage Medicare)

Diagnosis: _____

No review required for this plan.

Orders

	Interval	Defer Until	Duration
Appointment Requests			
☒ Apheresis Appointment Request	Every 1 day		8 treatments
Status: Once, Expected: S, Sched. Tolerance: Schedule appointment at most 1 day before or at most 1 days after			
Pre-Procedure Labs			
☒ CBC and differential	Every visit		8 treatments
Routine, Once Starting when released, Blood			
Release to patient: Immediate			
Unit Collect			
☒ CD34	Every visit		8 treatments
Routine, Once Starting when released, Blood			
Release to patient: 5 Day Delay			
If not ordered already			
Unit Collect			
☒ Calcium, ionized	Every visit		8 treatments
Routine, Once Starting when released, Blood			
Release to patient: Immediate			
If not ordered already			
Unit Collect			
☒ Comprehensive metabolic panel	Every visit		8 treatments
Routine, Once Starting when released, Blood			
Release to patient: Immediate			
If not ordered already. Test includes electrolytes and potassium			
Unit Collect			
☒ Magnesium	Every visit		8 treatments
Routine, Once Starting when released, Blood			
Release to patient: Immediate			
If not ordered already			
Unit Collect			
☒ Type and screen	Every visit		8 treatments
Routine, Once Starting when released, Blood			
Release to patient: Immediate			

	Interval	Defer Until	Duration
On day 1 Unit Collect			
☒ Cytomegalovirus antibody, IgG Once Starting when released, Blood, Venous, Blood Release to patient: Immediate	Every visit		8 treatments
☒ Cytomegalovirus antibody, IgM Once Starting when released, Blood, Venous, Blood Release to patient: Immediate	Every visit		8 treatments
Pre-Medications			
☒ lidocaine (LMX) 4 % cream Topical, Once, Starting when released Apply to peripheral IV site	Every visit		8 treatments
☒ sodium chloride 0.9 % infusion 50 mL/hr, intravenous, Once as needed, To keep vein open, Starting when released, for 1 dose	Every visit		8 treatments
Pre-Procedure			
☒ Vital Signs Per protocol Starting when released Until Specified	Every visit		8 treatments
Procedure			
☒ Vital Signs Routine, Per protocol Starting when released Until Specified Intra-procedure as needed.	Every visit		8 treatments
☒ Stem cell collection - allogenic Routine, Once Starting when released Intra-procedure as needed.	Every visit		8 treatments
Nursing Orders			
☒ Nursing communication Once Starting when released Refer to SOP for adverse reactions and contraindications to magnesium replacement	Every visit		8 treatments
☒ Nursing communication Once Starting when released Use ACD-A per procedure protocol	Every visit		8 treatments
Medications			
☒ acetaminophen (TYLENOL 8 HOUR) 8 hr tablet 650 mg 650 mg, oral, Every 4 hours PRN, mild pain (scale 1-3), Starting when released, Until Discontinued Maximum dose of acetaminophen is 4000 mg from all sources in 24 hours. Do not crush, chew, or split.	Every visit		8 treatments
☒ calcium gluconate 4 g in sodium chloride 0.9 % 250 mL IVPB 4 g, intravenous, Administer over: 60 Minutes, Once as needed, PRN may repeat x1, Starting when released, for 1 dose	Every visit		8 treatments
☒ ondansetron (Zofran) injection 8 mg 8 mg, intravenous, Once as needed, nausea, vomiting, Starting when released, for 1 dose	Every visit		8 treatments
☒ IP MEDICATIONS MAGNESIUM SULFATE 2 G IVPB INTRAVENOUS (60 MIN) SINGLE ☐ magnesium sulfate 2 g in sodium chloride 0.9 % 100 mL IVPB 2 g, intravenous, Administer over: 60 Minutes, Once, Starting when released If Magnesium is less than 1.8mg/dl, add 2 grams magnesium sulfate to Calcium. ELECTROLYTE REPLETION ORDERS/HYDRATION MAGNESIUM 1.6 - 1.4 replete with Magnesium Sulfate 2 gms IV infusion.	Every visit		8 treatments

	Interval	Defer Until	Duration
☐ magnesium sulfate 2 g in sodium chloride 0.9 % 100 mL IVPB 2 g, intravenous, Administer over: 60 Minutes, Every 1 hour PRN, If Magnesium 1.3-1.2 replete with Magnesium sulfate 4 gms, Starting when released, for 2 doses	Every visit		8 treatments
☒ IP MEDICATIONS POTASSIUM CHLORIDE 20 MEQ IF K=3.2 - <3.4 PACKET/IVPB SINGLE			
☐ potassium chloride (Klor-Con) packet 20 mEq 20 mEq, oral, Once as needed, If K=3.2 - <3.4 administer 20 mEq, Starting when released, for 1 dose If K=3.2 - <3.4; administer 20 mEq pre-procedure or after procedure Dissolve each packet in 4 ounces of water = 5 mEq per 1 oz fluid.	Every visit		8 treatments
☐ potassium chloride IVPB 20 mEq 20 mEq, intravenous, Every 1 hour PRN, If Potassium 3.2 - <3.4, replete with 20 mEq, for 1 dose If Potassium 3.2 - <3.4, replete with 20 mEq. Administer pre-procedure or after procedure. Administer if patient does not tolerate PO.	Every visit		8 treatments
☒ IP MEDICATIONS POTASSIUM CHLORIDE 20 MEQ IF K=3.0 - <3.2 PACKET/IVPB (60 MIN) SINGLE			
☐ potassium chloride (KLOR-CON) packet 20 mEq 20 mEq, oral, Once as needed, If K=3.0 - <3.2 administer 40 mEq, Starting when released, for 2 doses If K=3.0 - <3.2; administer 40 mEq pre-procedure or after procedure Dissolve each packet in 4 ounces of water = 5 mEq per 1 oz fluid.	Every visit		8 treatments
☐ potassium chloride 20 mEq in 100 mL IVPB 20 mEq, intravenous, Administer over: 60 Minutes, Every 1 hour PRN, If Potassium 3.0 - <3.2, replete with KCL 40 mEq, Starting when released, for 2 doses If Potassium 3.0 - <3.2, replete with KCL 40 mEq. Administer if patient does not tolerate PO. For central line administration only.	Every visit		8 treatments
☒ IP MEDICATIONS POTASSIUM CHLORIDE 20 MEQ IF K=2.8 - <3.0 PACKET/IVPB (60 MIN) SINGLE			
☐ potassium chloride (KLOR-CON) packet 20 mEq 20 mEq, oral, Once as needed, If K=2.8 - <3.0 administer 60 mEq, Starting when released, for 3 doses If K=2.8 - <3.0; administer 60 mEq pre-procedure or after procedure Dissolve each packet in 4 ounces of water = 5 mEq per 1 oz fluid.	Every visit		8 treatments
☐ potassium chloride 20 mEq in 100 mL IVPB 20 mEq, intravenous, Administer over: 60 Minutes, Every 1 hour PRN, If Potassium 2.8 - <3.0, replete with KCL 60 mEq, Starting when released, for 3 doses If Potassium 2.8 - <3.0, replete with KCL 60 mEq. Administer if patient does not tolerate PO. For central line administration only.	Every visit		8 treatments
☒ anticoagulant citrate dextrose solution A (ACD-A) infusion 100-200 mL/hr, CRRT, Continuous, Starting when released, Until Discontinued Hang prefilter for regional anticoagulation. Titrate citrate per protocol based on post-filter ionized calcium levels.	Every visit		8 treatments
Post-Medications			
☒ sodium chloride (NS) 0.9% flush 3 mL 3 mL, intravenous, Every 8 hours, Starting when released	Every visit		8 treatments
☒ heparin (PF) injection 5,000 Units 5,000 Units, subcutaneous, Every 8 hours, Starting when released	Every visit		8 treatments
Post-Procedure			
☒ Vital Signs Per protocol Starting when released Until Specified	Every visit		8 treatments
Post-Procedure Labs			
☒ CD34	Every visit		8 treatments

	Interval	Defer Until	Duration
Routine, Once Starting when released, Blood Release to patient: 5 Day Delay Product Unit Collect			
☒ CBC and differential Routine, Once, Blood Release to patient: Immediate Unit Collect	Every visit		8 treatments
☒ Flow cytometry Routine, Once Starting when released, Blood Release to patient: 5 Day Delay T cell lymphocyte subsets Unit Collect	Every visit		8 treatments

--	--	--	--

*Provider phone#

***Denotes field that must be completed by healthcare worker**