

Efgartigimod alfa (Vyvgart or Vyvgart Hytrulo) Weekly Every 50 Days (gMG)

Efgartigimod alfa-fcab 10 mg/kg IV OR Ergartigimod alfa-hyaluronidase-qvfc subcutaneous 1008 mg day 1, 8, 15, 22 every 50 days

Protocol Types

Infusion Treatment 1, Infusion Treatment 2, Infusion Treatment 3, Infusion Treatment 4

Patient name: _____ DOB: _____

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

Diagnosis: _____

Review: Every 358 days

Orders

	Interval	Defer Until	Duration
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Provider Communication

☒ Provider communication	Every visit		Until discontinued
Until discontinued Starting when released Until Specified			
Patients should be up to date with all immunizations before initiating therapy. Avoid the use of live vaccines in patients during treatment.			

Efgartigimod Alfa-fcab may increase the risk of infection. Delay treatment in patients with an active infection until the infection is resolved. Monitor for infection during treatment, and consider withholding treatment if infection develops.

Pre-Procedure Labs

☒ CBC and differential	Once		1 treatment
Status: Once, Expected: S, Clinic Collect, Blood, Venous, Blood, AH INTERNAL LAB (BEAKER), Routine			
☒ Basic metabolic panel	Once		1 treatment
Status: Once, Expected: S, Clinic Collect, Blood, Venous, Blood, AH INTERNAL LAB (BEAKER), Routine			
☒ Immunoglobulin IgG	Once		1 treatment
Status: Once, Expected: S, Clinic Collect, Blood, Venous, Blood, ARUP LABORATORY (BEAKER), Routine			

Labs

☒ hCG, serum, qualitative	Every visit		Until discontinued
Status: Once, Expected: S, Clinic Collect, Blood, Venous, Blood, AH INTERNAL LAB (BEAKER), Routine			
Inclusion conditions: Patient could become pregnant			
☐ CBC and differential			Until discontinued
Status: Once, Expected: S, Clinic Collect, Blood, Venous, Blood, AH INTERNAL LAB (BEAKER), Routine			
☐ Immunoglobulin IgG			Until discontinued
Status: Once, Expected: S, Clinic Collect, Blood, Venous, Blood, ARUP LABORATORY (BEAKER), Routine			

Nursing Orders

☒ Treatment conditions	Every visit		Until discontinued
Until discontinued Starting when released Until Specified			
Hold treatment and contact provider if patient has signs and symptoms of infection (fever, skin infection, need			

	Interval	Defer Until	Duration
for antibiotics etc).			
☒ Nursing communication	Every visit		Until discontinued
Until discontinued Starting when released Until Specified			
Monitoring parameters depend on route selected.			
IF IV INFUSION: Monitor patient for signs and symptoms of reaction during infusion and for 1 hour following completion.			
IF SUBCUTANEOUS INJECTION: Monitor patient for signs and symptoms of reaction during infusion and for 30 minutes following completion.			
Therapeutic Medications			
☒ Provider communication	Every visit		Until discontinued
Routine, Until discontinued Starting when released Until Specified			
In any instance of ordering, ordering is meant to include only intravenous OR only subcutaneous dosing.			
Default schedule is weekly dosing x 4 with subsequent cycles starting 50 days from the start of the previous cycle. Initiate subsequent cycles based on clinical evaluation. If appropriate, update next due date for subsequent cycles.			
☒ AH THERAPEUTIC MEDICATION EFGARTIGIMOD ALFA_FCAB (VYVGART) OR EFGARTIGIMOD ALFA			
☐ efgartigimod alfa-fcab (Vyvgart) solution 10 mg/kg	Every 7 days		4 treatments
10 mg/kg, intravenous, Administer over: 60 Minutes, Once, Starting when released			
Maximum dose 1200 mg.			
☐ efgartigimod alfa-fcab (Vyvgart) solution 1,008 mg	Every 7 days		4 treatments
1,008 mg, subcutaneous, Once, Starting when released			
Administer using 12-inch tubing, PVC winged set. Choose an injection site on abdomen a minimum of 2 to 3 inches from the naval, avoiding areas with moles or scars, or where skin is red, bruised or hard.			
Rotate injection sites for subsequent injections. Administer over a period of 30 to 90 seconds.			
☒ AH THERAPEUTIC MEDICATION EFGARTIGIMOD ALFA_FCAB (VYVGART) OR EFGARTIGIMOD ALFA			
☐ efgartigimod alfa-fcab (Vyvgart) solution 10 mg/kg	Every 7 days	S+50	4 treatments
10 mg/kg, intravenous, Administer over: 60 Minutes, Once, Starting when released			
Maximum dose 1200 mg.			
☐ efgartigimod alfa-fcab (Vyvgart) solution 1,008 mg	Every 7 days	S+50	4 treatments
1,008 mg, subcutaneous, Once, Starting when released			
Administer using 12-inch tubing, PVC winged set. Choose an injection site on abdomen a minimum of 2 to 3 inches from the naval, avoiding areas with moles or scars, or where skin is red, bruised or hard.			
Rotate injection sites for subsequent injections. Administer over a period of 30 to 90 seconds.			
☒ AH THERAPEUTIC MEDICATION EFGARTIGIMOD ALFA_FCAB (VYVGART) OR EFGARTIGIMOD ALFA			
☐ efgartigimod alfa-fcab (Vyvgart) solution 10 mg/kg	Every 7 days	S+100	4 treatments
10 mg/kg, intravenous, Administer over: 60 Minutes, Once, Starting when released			
Maximum dose 1200 mg.			
☐ efgartigimod alfa-fcab (Vyvgart) solution 1,008 mg	Every 7 days	S+100	4 treatments
1,008 mg, subcutaneous, Once, Starting when released			
Administer using 12-inch tubing, PVC winged set. Choose an injection site on abdomen a minimum of 2 to 3 inches from the naval, avoiding areas with moles or scars, or where skin is red, bruised or hard.			

	Interval	Defer Until	Duration
Rotate injection sites for subsequent injections. Administer over a period of 30 to 90 seconds.			
Emergency Medications			
☒ Nursing communication	PRN		Until discontinued
STAT, Until discontinued Starting when released Until Specified			
If hypersensitivity reaction occurs, stop infusion IMMEDIATELY and CALL provider.			
☒ Vital Signs	PRN		Until discontinued
STAT, Every 15 min Starting when released			
If a hypersensitivity reaction occurs, perform vital signs every 15 minutes for one hour, then every 30 minutes for 2 hours.			
☒ Nursing communication	PRN		Until discontinued
Once Starting when released			
If hypersensitivity reaction occurs:			
- Elevate head of bed 30 degrees and place patient's head at 30 degree angle if possible			
- Start 2 liters oxygen per nasal cannula and maintain airway			
- Change and maintain IV line with 1000 mL 0.9% Normal Saline			
☒ sodium chloride 0.9 % infusion	PRN		Until discontinued
30 mL/hr, intravenous, Continuous PRN, KVO, Starting when released, for 1 day			
☒ albuterol 2.5 mg /3 mL (0.083 %) nebulizer solution 2.5 mg	PRN		Until discontinued
2.5 mg, nebulization, Every 4 hours PRN, Hypersensitivity reaction, Starting when released, for 1 day			
☒ albuterol HFA 90 mcg/act inhaler 2 puff	PRN		Until discontinued
2 puff, inhalation, Every 4 hours PRN, Hypersensitivity reaction, Starting when released, for 1 day			
SHAKE WELL			
☒ acetaminophen (Tylenol) tablet 650 mg	PRN		Until discontinued
650 mg, oral, Once as needed, fever, GREATER THAN or EQUAL TO 38 C, Starting when released, for 1 dose			
For mild/moderate reaction: flushing, rash, pruritus			
☒ diphenhydrAMINE (BENADryl) injection 25 mg	PRN		Until discontinued
25 mg, intravenous, Administer over: 2 Minutes, Once as needed, Hypersensitivity reaction, Starting when released, for 1 dose			
For mild/moderate reaction: flushing, rash, pruritus			
☒ diphenhydrAMINE (BENADryl) injection 50 mg	PRN		Until discontinued
50 mg, intravenous, Administer over: 2 Minutes, Once as needed, Hypersensitivity reaction, Starting when released, for 1 dose			
For severe reaction: respiratory distress, stridor, wheezing, hypotension (SBP LESS THAN 100 mm Hg)			
☒ hydrocortisone sodium succinate (Solu-CORTEF) injection 100 mg	PRN		Until discontinued
100 mg, intravenous, Once as needed, Hypersensitivity reaction, Starting when released, for 1 dose			
For mild/moderate reaction: flushing, rash, pruritus			
- OR -			
For severe reaction: respiratory distress, stridor, wheezing, hypotension (SBP LESS THAN 100 mm Hg)			
☒ EPINEPHrine (EpiPen;Adrenalin) injection solution 0.3 mg	PRN		Until discontinued
0.3 mg, intramuscular, Once as needed, Hypersensitivity reaction, Starting when released, for 1 dose			
For severe reaction: respiratory distress, stridor, wheezing, hypotension (SBP LESS THAN 100 mm Hg)			

Appointment Requests

☒ Infusion Appointment Request	Every 7 days		4 treatments
Status: Once, Expected: S, Sched. Duration: 90 minutes, Sched. Tolerance: Schedule appointment at most 3 days before or at most 3 days after			
☒ Infusion Appointment Request	Every 7 days	S+50	4 treatments

	Interval	Defer Until	Duration
Status: Once, Expected: S, Sched. Duration: 90 minutes, Sched. Tolerance: Schedule appointment at most 3 days before or at most 3 days after			
☒ Infusion Appointment Request	Every 7 days	S+100	4 treatments
Status: Once, Expected: S, Sched. Duration: 90 minutes, Sched. Tolerance: Schedule appointment at most 3 days before or at most 3 days after			

*Provider signature

Provider printed name

*Date

Time

*Provider phone#

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