Rituximab Maintenance Every 6 Months

Rituximab (or biosimilar) 1000 mg every 24 weeks (6 months)

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
Provider Communication			
☑ Provider communication	Every 168 days		Until discontinued

Until discontinued Starting when released Until Specified
Hepatitis B surface antigen (HBsAg) and hepatitis B core antibody (anti-HBc) screening must be completed prior to initiation of treatment. Patients with evidence of current or prior hepatitis B infection should be monitored for hepatitis B virus reactivation during and after therapy.

If the patient is at high risk for tuberculosis exposure, tuberculosis screening (PPD or QuantiFERON-TB Gold) should be completed prior to treatment initiation. If the result is indeterminate, additional evaluation should be performed as clinically indicated.

Monitor patients for signs and symptoms of infection during and after rituximab treatment.

Supplemental Labs

☐ Hepatitis B Screening Labs			
☑ Hepatitis B Surface Antigen	Every 365 days		Until discontinued
Status: Once, Expected: S, Clinic Collect, Blood, Venous, Blood, AH INTERNAL LAB (BEAKER), Routine			
☑ Hepatitis B Surface Antibody Quant	Every 365 days		Until discontinued
Status: Once, Expected: S, Clinic Collect, Blood, Venous, Blood, AH INTERNAL LAB (BEAKER), Routine			
☑ Hepatitis B Core Antibody, Total	Every 365 days		Until discontinued
Status: Once, Expected: S, Clinic Collect, Blood, Venous, Blood, AH INTERNAL LAB (BEAKER), Routine			
☐ TB Screening Labs			
☐ QUANTIFERON TB GOLD	Every 365 days		Until discontinued
Status: Once, Expected: S, Clinic Collect, Blood, Venous, Blood, AH INTERNAL LAB (BEAKER), Routine			
☐ TB Skin Test	Every 365 days		Until discontinued
Routine, Once Starting when released, Miscellaneous Release to patient: Immediate Point Of Care			
☐ Read PPD	Every 365 days		Until discontinued
Routine, Once Starting when released, Miscellaneous Release to patient: Immediate Point Of Care			

	Interval	Defer Until	Duration

Labs

☑ hCG, serum, qualitative	Every 168 days		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	Every 168 days		Until discontinued

Status: Once, Expected: S, Clinic Collect, Blood, Venous, Blood, AH INTERNAL LAB (BEAKER), Routine

☑ Comprehensive metabolic panel	Every 168 days		Until discontinued

Status: Once, Expected: S, Clinic Collect, Blood, Venous, Blood, AH INTERNAL LAB (BEAKER), Routine

☑ Immunoglobulins (IgA, IgG, IgM), Quantitative	Every 90 days		Until discontinued

Status: Once, Expected: S, Clinic Collect, Blood, Venous, Blood, AH INTERNAL LAB (BEAKER), Routine

Nursing Orders

☑ Treatment conditions	Once		1 treatment

Until discontinued Starting when released Until Specified

Hold treatment and contact provider if Hepatitis B surface antigen or core antibody total test result is positive, TB test result is positive, or if screening has not been performed.

☑ Nursing communication	Every 168 days		Until discontinued

Until discontinued Starting when released Until Specified

During riTUXimab infusion obtain vital signs at baseline, then every 30 minutes with rate escalation, then every hour for the duration of the infusion.

Monitoring not required for third infusion and beyond, if no previous infusion reactions. Lengthened monitoring recommended for previous infusion reactions, contact provider for guidance.

Pre-Medications

☑ AH PREMEDS ACETAMINOPHEN 650 / DIPHENHYDRAMINE 50 PO / LORATADINE 10 PO (PRN) / METHYLPREDNISOLONE 125 IV (OFFSET 0 MIN)

☑ acetaminophen (Tylenol) tablet 650 mg	Every 168 days		Until discontinued

650 mg, oral, Once, Starting at treatment start time

☑ diphenhydrAMINE (BENADryl) 50 mg	Every 168 days		Until discontinued

50 mg, oral, Once, Starting at treatment start time

Give diphenhydramine if patient has transportation. Give either loratadine or diphenhydrAMINE, not both.

☑ loratadine (Claritin) tablet 10 mg	Every 168 days		Until discontinued

10 mg, oral, Once as needed, allergies, if diphenhydramine is not given, Starting at treatment start time, Until Discontinued

Give loratadine if patient does NOT have transportation. Give either loratadine or diphenhydrAMINE, not both.

☑ methylPREDNISolone sod suc (PF) (SOLU-Medrol) injection 125 mg	Every 168 days		Until discontinued

125 mg, intravenous, Once, Starting when released

Therapeutic Medications

☑ riTUXimab IVPB 1,000 mg	Every 168 days		Until discontinued

1,000 mg, intravenous, Once, Starting 30 minutes after treatment start time

Start rate of 100 mg/hour; if there is no reaction, increase the rate by 100 mg/hour increments every 30 minutes, to a maximum rate of 400 mg/hour

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

	Interval	Defer Until	Duration
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 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	PRN		Until discontinued
☑ sodium chloride 0.9 % infusion 30 mL/hr, intravenous, Continuous PRN, KVO, Starting when released, for 1 day	PRN		Until discontinued
☑ albuterol 2.5 mg /3 mL (0.083 %) nebulizer solution 2.5 mg 2.5 mg, nebulization, Every 4 hours PRN, Hypersensitivity reaction, Starting when released, for 1 day	PRN		Until discontinued
☑ albuterol HFA 90 mcg/act inhaler 2 puff 2 puff, inhalation, Every 4 hours PRN, Hypersensitivity reaction, Starting when released, for 1 day SHAKE WELL	PRN		Until discontinued
☑ acetaminophen (Tylenol) tablet 650 mg 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	PRN		Until discontinued
☑ diphenhydrAMINE (BENADryl) injection 25 mg 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	PRN		Until discontinued
☑ diphenhydrAMINE (BENADryl) injection 50 mg 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)	PRN		Until discontinued
☑ hydrocortisone sodium succinate (Solu-CORTEF) injection 100 mg 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)	PRN		Until discontinued
☑ EPINEPHrine (EpiPen;Adrenalin) injection solution 0.3 mg 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)	PRN		Until discontinued

Appointment Requests

☑ Infusion Appointment Request Status: Once, Expected: S, Sched. Duration: 180 minutes, Sched. Tolerance: Schedule appointment at most 3 days before or at most 3 days after	Every 168 days		Until discontinued

*Provider signature | Provider printed name | *Date | Time

*Provider phone#

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