

Tildrakizumab (ILUMYA) Loading and Q12 Week Maintenance

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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	Once		1 treatment
Until discontinued Starting when released Until Specified			
Evaluate patients for tuberculosis (TB) infection prior to initiating treatment with tildrakizumab. Do not initiate tildrakizumab in patients with active TB infection. Initiate treatment of latent TB prior to administering tildrakizumab.			
☒ Provider communication	Once		1 treatment
Until discontinued Starting when released Until Specified			
Review vaccination status prior to therapy initiation. Avoid administration of live vaccines during treatment with tildrakizumab.			
Supplemental Labs			
☐ TB Screening Labs			
☐ QUANTIFERON TB GOLD	Once		1 treatment
Status: Once, Expected: S, Clinic Collect, Blood, Venous, Blood, AH INTERNAL LAB (BEAKER), Routine			
☐ TB Skin Test	Once		1 treatment
Routine, Once Starting when released, Miscellaneous			
Release to patient: Immediate			
Point Of Care			
☐ Read PPD	Once		1 treatment
Routine, Once Starting when released, Miscellaneous			
Release to patient: Immediate			
Point Of Care			
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 for antibiotics etc).			
Pre-Medications			
☒ acetaminophen (Tylenol) tablet 650 mg	Every visit		Until discontinued
650 mg, oral, Once as needed, for prior infusion reaction, Starting at treatment start time, Until Discontinued			

	Interval	Defer Until	Duration
☒ diphenhydrAMINE (BENADryl) 25 mg 25 mg, oral, Once as needed, for prior infusion reaction, Starting at treatment start time, Until Discontinued Give diphenhydramine if patient has transportation. Give either loratadine or diphenhydramine, not both.	Every visit		Until discontinued
☒ loratadine (Claritin) tablet 10 mg 10 mg, oral, Once as needed, for prior infusion reaction, Starting at treatment start time, Until Discontinued Give loratadine if patient does NOT have transportation. Give either loratadine or diphenhydramine, not both.	Every visit		Until discontinued
☒ dexAMETHasone (Decadron) IV 10 mg 10 mg, intravenous, Administer over: 5 Minutes, Once as needed, for prior infusion reaction, Starting at treatment start time, Until Discontinued	Every visit		Until discontinued

Therapeutic Medications

☒ tildrakizumab (Ilumya) injection 100 mg 100 mg, subcutaneous, Once, Starting at treatment start time Administer into thigh, upper arm, or abdomen (at least 2 inches from navel); avoid tender, bruised, red, swollen, or psoriatic skin, and scars, blood vessels and stretch marks. Rotate injection sites. Remove from fridge and allow to sit at room temperature for 30 minutes prior to administering. Do not shake.	Every 28 days		2 treatments
☒ tildrakizumab (Ilumya) injection 100 mg 100 mg, subcutaneous, Once, Starting at treatment start time Administer into thigh, upper arm, or abdomen (at least 2 inches from navel); avoid tender, bruised, red, swollen, or psoriatic skin, and scars, blood vessels and stretch marks. Rotate injection sites. Remove from fridge and allow to sit at room temperature for 30 minutes prior to administering. Do not shake.	Every 84 days	S+112	Until discontinued

Emergency Medications

☒ Nursing communication STAT, Until discontinued Starting when released Until Specified If hypersensitivity reaction occurs, stop infusion IMMEDIATELY and CALL provider.	Every visit		Until discontinued
☒ Vital Signs 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.	Every visit		Until discontinued
☒ 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	Every visit		Until discontinued
☒ sodium chloride 0.9 % infusion 30 mL/hr, intravenous, Continuous PRN, KVO, Starting when released, for 1 day	Every visit		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	Every visit		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	Every visit		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	Every visit		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	Every visit		Until discontinued
☒ diphenhydrAMINE (BENADryl) injection 50 mg	Every visit		Until discontinued

	Interval	Defer Until	Duration
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 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)	Every visit		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)	Every visit		Until discontinued

Appointment Requests

☒ Infusion Appointment Request Status: Once, Expected: S, Sched. Duration: 60 minutes, Sched. Tolerance: Schedule appointment at most 3 days before or at most 3 days after	Every 28 days		2 treatments
☒ Infusion Appointment Request Status: Once, Expected: S, Sched. Duration: 60 minutes, Sched. Tolerance: Schedule appointment at most 3 days before or at most 3 days after	Every 84 days	S+112	Until discontinued

*Provider signature	Provider printed name	*Date	Time
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*Provider phone#

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