

Ustekinumab (Stelara) Initial Dose Followed by Maintenance Every 8 Weeks (Inflammatory Bowel Disease)

Ustekinumab weight based dosing IV initial dose followed by 90 mg subq every 8 weeks

Protocol Types

Infusion Treatment 1, Infusion Treatment 2, Infusion Treatment 3

Patient name: _____ DOB: _____

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

Review: Every 180 days

Orders

	Interval	Defer Until	Duration
Provider Communication			
☒ Provider communication	Every 56 days		Until discontinued
Until discontinued Starting when released Until Specified			
A Tuberculin test must have been placed and read as negative prior to initiation of treatment (PPD or QuantiFERON Gold blood test). If result is indeterminate, a follow up chest X-ray must be performed to rule out TB. Patients should not have an active ongoing infection at the onset of ustekinumab therapy.			
Monitor patients for signs / symptoms of active TB, infection, reversible posterior leukoencephalopathy syndrome (RPLS), and malignancy throughout therapy.			
Supplemental Labs			
☐ Hepatitis B Screening Labs			
☒ Hepatitis B Surface Antigen	Every 365 days		Until discontinued
Status: Future, Expected: S, Expires: S+365, Clinic Collect, Blood, Venous, Blood, AH INTERNAL LAB (BEAKER), Routine			
☒ Hepatitis B Surface Antibody Quant	Every 365 days		Until discontinued
Status: Future, Expected: S, Expires: S+365, Clinic Collect, Blood, Venous, Blood, AH INTERNAL LAB (BEAKER), Routine			
☒ Hepatitis B Core Antibody, Total	Every 365 days		Until discontinued
Status: Future, Expected: S, Expires: S+365, Clinic Collect, Blood, Venous, Blood, AH INTERNAL LAB (BEAKER), Routine			
☐ TB Screening Labs			
☐ QUANTIFERON TB GOLD	Every 365 days		Until discontinued
Status: Future, Expected: S, Expires: S+365, 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

	Interval	Defer Until	Duration
Routine, Once Starting when released, Miscellaneous			
Release to patient: Immediate			
Point Of Care			

Labs

☒ CBC and differential	Every 56 days		Until discontinued
Status: Future, Expected: S, Expires: S+365, Clinic Collect, Blood, Venous, Blood, AH INTERNAL LAB (BEAKER), Routine			
☒ Comprehensive metabolic panel	Every 56 days		Until discontinued
Status: Future, Expected: S, Expires: S+365, 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.			
☒ Treatment conditions	Every 56 days		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).			

Therapeutic Medications

☒ ustekinumab (Stelara) in sodium chloride 0.9 %	Once		1 treatment
250 mL infusion			
intravenous, Administer over: 1 Hours, Once, Starting when released			
Less than or equal to 55 kg dose = 260 mg			
Greater than 55-85 kg dose = 390 mg			
Greater than 85 kg dose = 520 mg			
Use a 0.2 micron, low-protein binding in-line filter for administration into dedicated IV line.			
☐ ustekinumab (Stelara) injection 90 mg	Every 56 days	S+56	Until discontinued
90 mg, subcutaneous, Once, Starting when released			
Do not inject into tender, bruised, erythematous, or indurated skin.			
Administer into top of thigh, abdomen, upper arms, or buttocks. Rotate sites. Avoid areas of psoriasis if present.			

Medications

☒ acetaminophen (Tylenol) tablet 650 mg	PRN		Until discontinued
650 mg, oral, Once as needed, headaches, fever, chills, or malaise, Starting when released, Until Discontinued			
☒ diphenhydrAMINE (BENADryl) 25 mg	PRN		Until discontinued
25 mg, oral, Once as needed, itching - 1st line, rash, Starting when released, Until Discontinued			
Give diphenhydramine if patient has transportation. Give either loratadine or diphenhydramine, not both.			
☒ loratadine (Claritin) tablet 10 mg	PRN		Until discontinued
10 mg, oral, Once as needed, For itching or rash if diphenhydramine is not given, Starting when released, Until Discontinued			
Give loratadine if patient does NOT have transportation. Give either loratadine or diphenhydramine, not both.			

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

	Interval	Defer Until	Duration
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	Once		1 treatment
Status: Future, Expected: S, Expires: S+365, Sched. Duration: 120 minutes, Sched. Tolerance: Schedule appointment at most 3 days before or at most 3 days after			
☐ Infusion Appointment Request	Every 56 days	S+56	Until discontinued
Status: Future, Expected: S, Expires: S+365, Sched. Duration: 30 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**