

Medication Administration Protocol: Pancreaticoduodenectomy with pancreatic anastomosis, Total pancreatectomy with islet autotransplantation

Document Control Information

Document ID:	MED-PROT-8431
Effective Date:	
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Therapeutic Class:	Clinical Trial
Risk Level:	Medium

Standard Dosing Protocol

Current Standard Dose: Study protocol dosing

Monitoring Requirements: Standard study precautions

Administration Guidelines

Route of Administration: Oral

Frequency: Twice daily

Duration: Until discontinued

Patient Population: Clinical trial participants (n=60)

Contraindications and Precautions

Contraindications: Per trial protocol

Adverse Events: As reported in trial monitoring

Detailed Clinical Considerations

Patient Monitoring Protocol

Regular monitoring is essential for safe administration of Pancreaticoduodenectomy with pancreatic anastomosis, Total pancreatectomy with islet autotransplantation. Current protocols require Standard study precautions. Healthcare providers should assess patient response and adjust therapy accordingly. Baseline laboratory values should be obtained prior to initiation. The mechanism of action involves Under clinical investigation. Clinical efficacy has been demonstrated in Postpancreatectomy Hyperglycemia.

Special Populations

Elderly Patients: Dose adjustment may be required based on renal function and overall health status.

Pediatric Patients: Safety and efficacy not established in patients under 18 years.

Pregnancy: Use only if potential benefit justifies potential risk to fetus.

Nursing Mothers: Exercise caution when administering to nursing women.

Last revised: June 2024