

Vancouver Coastal Health
 VA: VGH / UBCH / GFS
 VC: BP / Purdy / GPC

ORDERS

ADDRESSOGRAPH

COMPLETE OR REVIEW ALLERGY STATUS PRIOR TO WRITING ORDERS

ACUTE LYMPHOBLASTIC LEUKEMIA (ALL 13-01)
CONSOLIDATION 1B CHEMOTHERAPY – PEGASPARGASE ORDERS - OUTPATIENT
Adult Ph-Negative ALL Patients (16-39 years)

(Items with check boxes must be selected to be ordered)

(Page 1 of 2)

Date: _____ Time: _____

☐ Consent signed for chemotherapy
 Time
 Processed
 RN/LPN Initials
 Comments

Must be completed prior to ordering chemotherapy: This person of child bearing potential has been assessed for the possibility of pregnancy.

Prescriber's signature _____

Printed name _____

College ID _____

Dosing Calculations

Height: _____ cm	Actual Weight: _____ kg
▪ Document height and weight on Nursing Assessment Form and must be co-signed by 2 nurses	
$BMI(kg/m^2) = \frac{Weight(kg)}{[Height(m)]^2}$ https://www.nhlbi.nih.gov/health/educational/lose_wt/BMI/bmi-m.htm	BMI = _____ kg/ m²
$BSA(m^2) = \sqrt{\frac{Height(cm) \times Weight(kg)}{3600}}$	BSA = _____ m²
Round all BSA calculations to 2 decimal places	

Use actual weight or BSA to calculate chemotherapy doses

Start on Day 8 of Consolidation 1B

LABORATORY:

Every 3 weeks prior to each pegaspargase dose:

INR, PTT, fibrinogen, bilirubin (total and direct), ALT, AST, amylase, lipase, fasting glucose and triglyceride levels

MONITORING:

Vital signs during pegaspargase infusion, then during and after pegaspargase infusion as clinically indicated;
 observe for 1 hour after the end of the infusion.

MEDICATIONS:**Premedications:**

acetaminophen 650 mg PO x 1 dose 30 minutes prior to pegaspargase

diphenhydramine ☐ 25 mg PO x 1 dose ***OR*** ☐ 50 mg PO x 1 dose 30 minutes prior to pegaspargase

hydrocortisone 100 mg IV x 1 dose 30 minutes prior to pegaspargase

Vancouver Coastal Health
 VA: VGH / UBCH / GFS
 VC: BP / Purdy / GPC

ORDERS

ADDRESSOGRAPH

COMPLETE OR REVIEW ALLERGY STATUS PRIOR TO WRITING ORDERS

ACUTE LYMPHOBLASTIC LEUKEMIA (ALL 13-01)
CONSOLIDATION 1B CHEMOTHERAPY – PEGASPARGASE ORDERS - OUTPATIENT
Adult Ph-Negative ALL Patients (16-39 years)

(Items with check boxes must be selected to be ordered)

(Page 2 of 2)

Date: _____ Time: _____

MEDICATIONS continued:

BCCA Code for PCIS order entry: LKNOS

All intensive chemotherapy orders require 2 prescriber signatures, one of whom must be an attending physician.

Chemotherapy:

pegaspargase * (ONCASPAR) (2,000 units/m²/dose rounded to nearest 75 units to maximum of 3750 units)
 _____ units in sodium chloride 0.9% (NS) 100 mL IV over 1 to 2 hours.

Give at least 4 hours after vinCRISTine if given on the same day.

Confirm each pegaspargase dose with prescriber prior to administration.

* Omit pegaspargase if Ph positive or planned for allogeneic hematopoietic stem cell transplant.

Give **every 3 weeks** x 10 doses:

Dose # 1 (date): _____	Dose # 6 (date): _____
Dose # 2 (date): _____	Dose # 7 (date): _____
Dose # 3 (date): _____	Dose # 8 (date): _____
Dose # 4 (date): _____	Dose # 9 (date): _____
Dose # 5 (date): _____	Dose # 10 (date): _____

Have the following available on unit for pegaspargase infusion:

diphenhydramine 50 mg IV Q4H PRN hypersensitivity reaction
 epinephrine 1 mg/mL solution 0.5 mg (0.5 mL) IM (preferred route if platelet count above 50 x 10⁹ /L) *OR*
 SUBCUTANEOUS Q5 to 15 MIN PRN anaphylaxis or hypotension
 hydrocortisone 100 mg IV Q6H PRN hypersensitivity reaction
 salbutamol 5 mg nebule for inhalation by nebulizer Q2 to 4H PRN dyspnea

Prophylactic anticoagulation: (to be continued until at least 3 weeks after the final dose of pegaspargase)

dalteparin 5000 units SUBCUT DAILY at 20:00 starting the same day as pegaspargase (provide prescription)

NOTES TO PRESCRIBER: (Unit Clerk/Pharmacy do not process – reminders for prescriber only)

Dose modifications for pegaspargase (see additional information in L/BMT Manual):

Hold pegaspargase for clinical pancreatitis or asymptomatic amylase or lipase elevations above 3x ULN.
 Hold pegaspargase for untreated thrombosis until treated.
 Hold pegaspargase if fibrinogen below 0.5 mg/L, direct bilirubin above 51.3 micromol/L, or ALT or AST above 5x ULN.
 Hold pegaspargase if triglycerides above 22.6 mmol/L and initiate lipid-lowering agent; proceed with pegaspargase
 AND initiate lipid-lowering agent if triglycerides between 11.3 and 22.6 mmol/L.

Notes on dalteparin:

Hold prophylactic dose at least 12 hours prior to invasive procedures (e.g. lumbar puncture, bone marrow biopsy) and restart the day after procedure (Prescriber to write orders to specify when to hold and restart dalteparin).
 Hold dalteparin if platelet count 30 x 10⁹/L or lower.
 Complete dalteparin Pharmacare Special Authority, indication being DVT prophylaxis for patients with thrombophilia.

Time
 Processed
 RN/LPN Initials
 Comments