COOLEY DICK HOSPITAL MASSACHUSETTS GENERAL HOSPI				(Patient Stic	ker)
INTRAVI	T: FERUMOXYTOL)				
CDH 208-233	– Approved -	Page 1 of 4			
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COOLEY DICKINSON HOSPITAL massachusetts general hospital affiliate			(Patient Sticker)		
	PHYSICIAN ORDER SET : INTRAVENOUS FERAHEME (FERUMO	DXYTOL)			
	CDH 208-233 – Approved - Page 3 of	4			
the	ter management (continued)				
		Interval	Defer Until	Duration	
	heparin 10 units/mL flush 3 mL	PRN		Until discont	
	3 mL, Intravenous, As needed, line care, Line care per institutional guide	elines, Starting S			
	heparin 10 units/mL flush 5 mL 5 mL, Intravenous, As needed, line care, Line care per institutional guide	PRN elines, Starting S		Until discont	
	heparin 1000 units/mL flush 2 mL	PRN		Until discont	
	2 mL, Intracatheter, As needed, line care, APHERESIS LINE CARE ON FROM EACH LUMEN PRIOR TO FLUSHING OR INFUSING THROUGH	H THE APHERESIS CATHE			
	sodium chloride (NS) 0.9 % syringe flush 3 mL 3 mL, Intravenous, As needed, line care, Line care per institutional guide	PRN elines, Starting S		Until discont	
	sodium chloride (NS) 0.9 % syringe flush 10 mL 10 mL, Intravenous, As needed, line care, Line care per institutional guid	PRN		Until discont	
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	sodium chloride 0.9% infusion 20 mL/hr, Intravenous, Continuous PRN, other (free text field), Keep vei	PRN	Starting S	Until discont	
	D5W infusion	PRN		Until discont	
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	Provider and Nurse Communication Routine, Until discontinued, Starting S, Treatment of SEVERE reaction (distress, or decreased oxygen saturation. Stop the infusion and treat wit administer oxygen as needed, monitor vital signs and proceed with adm	Interval PRN ANAPHYLAXIS): hypotensi h epinephrine FIRST. Notify	Defer Until on, throat swelling, wh provider and emerged	Until discont neezing, respirator ncy personnel,	
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	gency Medications Provider and Nurse Communication Routine, Until discontinued, Starting S, Treatment of SEVERE reaction (distress, or decreased oxygen saturation. Stop the infusion and treat wit administer oxygen as needed, monitor vital signs and proceed with adm indicated. EPINEPHrine injection 0.3 mg 0.3 mg, Intramuscular, As needed, anaphylaxis, Administer FIRST for an For 2 doses. Pharmacy's Suggested Dose Instructions; Epinephrin sodium chloride 0.9% bolus 1,000 mL 1,000 mL, Intravenous, Once as needed, other (free text field), For hypo Oxygen Therapy - Non-Rebreather Routine Select a Mode of Therapy: Non-Rebreather Tryptase STAT, Once, Starting S For 1 Occurrences Collect for mild-moderate, or SEVERE reaction sensitivity Provider and Nurse Communication Routine, Until discontinued, Starting S For Until specified, Treatment for and emergency personnel, administer oxygen as needed, monitor vital s indicated. If ANAPHYLAXIS reaction, refer to Emergency Medications set	Interval PRN ANAPHYLAXIS): hypotensic h epinephrine FIRST. Notify inistering adjunct HYPERSE PRN haphylaxis. May repeat times te 1:1000 is equivalent to 1 r PRN tension, Starting S, For 1 Do PRN PRN PRN Interval PRN mild-moderate infusion read igns and proceed with admi ection. PRN	Defer Until on, throat swelling, wh provider and emerger NSITIVITY medicatio a 1 dose, Starting S mg/mL oses Defer Until etion: Stop the infusior nistering medications	Until discont neezing, respirator ncy personnel, ns as clinically Until discont Until discont Until discont Until discont Until discont n, notify provider as clinically	
	gency Medications Provider and Nurse Communication Routine, Until discontinued, Starting S, Treatment of SEVERE reaction (distress, or decreased oxygen saturation. Stop the infusion and treat wit administer oxygen as needed, monitor vital signs and proceed with adm indicated. EPINEPHrine injection 0.3 mg 0.3 mg, Intramuscular, As needed, anaphylaxis, Administer FIRST for an For 2 doses. Pharmacy's Suggested Dose Instructions; Epinephrin sodium chloride 0.9% bolus 1,000 mL 1,000 mL, Intravenous, Once as needed, other (free text field), For hypo Oxygen Therapy - Non-Rebreather Routine Select a Mode of Therapy: Non-Rebreather Tryptase STAT, Once, Starting S For 1 Occurrences Collect for mild-moderate, or SEVERE reaction sensitivity Provider and Nurse Communication Routine, Until discontinued, Starting S For Until specified, Treatment for and emergency personnel, administer oxygen as needed, monitor vital s indicated. If ANAPHYLAXIS reaction, refer to Emergency Medications se albuterol (ACCUNEB) nebulizer solution 2.5 mg	Interval PRN ANAPHYLAXIS): hypotensic h epinephrine FIRST. Notify inistering adjunct HYPERSE PRN haphylaxis. May repeat times te 1:1000 is equivalent to 1 r PRN tension, Starting S, For 1 Do PRN PRN PRN Interval PRN mild-moderate infusion read igns and proceed with admi ection. PRN	Defer Until on, throat swelling, wh provider and emerger NSITIVITY medicatio a 1 dose, Starting S mg/mL oses Defer Until etion: Stop the infusior nistering medications	Until discont neezing, respirator ncy personnel, ns as clinically Until discont Until discont Until discont Until discont Until discont n, notify provider as clinically	

X B	COOLEY DICKINSON HOSPITAL massachusetts general hospital affiliate			(Patient Stic	ker)
	PHYSICIAN ORDER SET : INTRAVENOUS FERAHEME (FERUMOXYTOL)				
	CDH 208-233 — Approved - Page 4 of 4				
Hyper	sensitivity (continued)				
		Inter	val	Defer Until	Duration
	25 mg, Intravenous, As needed, itching, itching, hives. Begin with 25 mg. If patient has Starting S	s contin	ued reacti	ion, administer add	itional 25 mg,
	famotidine (PEPCID) injection 20 mg	PRN	J		Until discont'd
	20 mg, Intravenous, Once as needed, other (free text field), Adjunct treatment for mild- premed, Starting S, For 1 Doses	-moder	ate, or SE	VERE reaction Ho	ld if: given as
	cetirizine (ZyrTEC) tablet 10-20 mg	PRN	l		Until discont'd
	10-20 mg, Oral, Once as needed, allergies, Adjunct treatment for mild-moderate, or SE HOLD IF giving fexofenadine.	EVERE	reaction,	Starting S, For 1 D	loses
	fexofenadine (ALLEGRA) tablet 90-180 mg	PRN	J		Until discont'd
	90-180 mg, Oral, Once as needed, allergies, Adjunct treatment for mild-moderate, or S	SEVER	E reaction	, Starting S, For 1	Doses
	HOLD IF giving cetirizine.				
	methylprednisolone sodium succinate (SOLU-Medrol) IV 40 mg	PRN	J		Until discont'd
	40 mg, Intravenous, Once as needed, other (free text field), Adjunct treatment for mild- Doses	-moder	ate, or SE	VERE reaction, St	arting S, For 1
	ondansetron (ZOFRAN) injection 4 mg	PRN	1		Until discont'd
	4 mg, Intravenous, As needed, nausea, vomiting, may repeat x 1 dose, Starting S, For	2 Dos	es		

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