

Trinity Health Muskegon & Shelby Infusion Clinics

Muskegon: 1500 Sherman BLVD, Muskegon, MI 49444

Shelby: 72 S. State St. Shelby, MI 49455

Fax: 231-727-4328

Infliximab IV Infusion

With fax include: demographics, insurance information, lab Results, current medications, and most recent visit notes. Trinity Health Muskegon will obtain any necessary medication authorizations for patients receiving infusion therapies at Trinity Health Muskegon and Shelby Ambulatory Infusion Clinics.

Order Date: ____/____/____ Site of Service: TH Muskegon

Referral Status: New Referral Dose or Frequency Change Renewal

Patient Name: _____ Primary Insurance _____
Date of Birth: ____/____/____ Weight: _____ kg Height: _____ cm Member ID _____
Allergies: _____ Secondary Insurance _____
Member ID _____

Diagnosis

Rheumatoid Arthritis (M06) specified joint and
laterality ICD 10: _____

Ankylosing Spondylitis (M45)

Psoriatic Arthropathy (L40.59)

Regional Enteritis Unspecified (K50.90)

Ulcerative Enterocolitis (K51.00)

Ulcerative Colitis Unspecified (K51.90)

Other: _____

Previously tried and failed therapies (include dates) _____

Labs

To Be Collected: BMP CMP Hepatic Panel CBC w/diff CBC w/o diff CRP ESR

Lab Frequency: EVERY infusion Other: _____

Pre-Medications

Acetaminophen:	650 mg	Oral
Loratadine:	10 mg	Oral
Diphenhydramine:	50 mg	Oral IV
Famotidine:	20 mg	Oral IV
Hydrocortisone:	100 mg	IV
Methylprednisolone:	125 mg	IV

Infliximab Biosimilar

Pharmacist to select[†]

Renflexis® (Infliximab-abda) - **preferred**
Inflectra® (infliximab-dyyb)

Remicade® (infliximab)

Dose: 3mg/kg 5mg/kg 7.5 mg/kg 10mg/kg ____mg/kg ____mg

Rounding: Per institutional rounding rules

Frequency: Induction – 0, 2, 6 weeks

THEN

Maintenance – q 6 weeks q 8 weeks q ____ weeks

Date of last infusion: ____/____/____

Ordering Provider Name: _____ Ordering Provider Signature: _____

Attending Physician Name (needed if ordering provider is an advanced practice practitioner): _____

Office Phone Number: _____ Office Fax Number: _____

Pharmacist will work with financial coordinator to select product based on patient's insurance coverage &

Trinity Health Formulary in the following order: Renflexis® → Inflectra® → infliximab → Remicade®

Infusion Clinic Standard Care Protocols

IV Access/Line Management

- ✓  **Nursing communication**
Initiate peripheral intravenous access, PRN per institutional policy, to administer medications ordered.
Last released: Never
- ✓  **Nursing communication**
Access central venous access device (CVAD) PRN per institutional policy, to administer medications ordered.
Last released: Never
- ✓  **sodium chloride 0.9 % flush 5 mL**
5 mL, intravenous, As needed, line care, Starting when released, Until Discontinued
Last released: Never
- ✓  **sodium chloride 0.9 % flush 10 mL**
10 mL, intravenous, As needed, line care, Starting when released, Until Discontinued
Last released: Never
- ✓  **sodium chloride 0.9 % infusion**
20 mL/hr, intravenous, As needed, to keep vein open, Starting at treatment start time, for 1 day
Last released: Never
- ✓  **heparin 100 unit/mL flush injection 300 Units**
300 Units, intravenous, As needed, line care, Starting when released, Until Discontinued
Last released: Never
- ✓  **heparin 100 unit/mL flush injection 500 Units**
500 Units, intravenous, As needed, line care, Starting when released, Until Discontinued
Last released: Never

Emergency Medications

- ✓  **Nursing communication**
VITAL SIGNS: If patients has suspected hypersensitivity or infusion reaction:
Every 5 minutes until stable; then every 15 minutes until symptoms resolved.
Last released: Never
- ✓  **Nursing communication**
PULSE OXIMETRY: For suspected hypersensitivity or infusion reaction, initiate pulse oximetry monitoring.
May discontinue once symptoms resolve.
Last released: Never
- ✓  **sodium chloride 0.9 % bolus 500 mL**
500 mL, intravenous, Once as needed, for hypotensive management (systolic BP below 90 mmHg), Starting when released, Until Discontinued
RUN WIDE OPEN AND AWAIT PHYSICIAN ORDERS
Last released: Never
- ✓  **acetaminophen (TYLENOL) tablet 650 mg**
650 mg, oral, Once as needed, generalized pain, back pain, headache, temperature greater than 100.5 degrees F, abdominal cramping, Starting when released, Until Discontinued
Last released: Never
- ✓  **albuterol 2.5 mg /3 mL (0.083 %) nebulizer solution 2.5 mg**
2.5 mg, nebulization, Every 10 min PRN, wheezing, bronchospasm, hypoxemia, dyspnea, Starting when released, for 2 doses
May repeat x 1 if symptoms unresolved.
Administer with 8L of oxygen.
Last released: Never
- ✓  **EPINEPHrine (EPIPEN) 0.3 mg/0.3 mL injection 0.3 mg**
0.3 mg, intramuscular, Every 15 min PRN, SBP less than 90 mmHg, mild to moderate anaphylaxis, Starting when released, for 3 doses
May repeat x 2 as needed
Last released: Never
- ✓  **famotidine (PF) (PEPCID) injection 20 mg**
20 mg, intravenous, Administer over 2 Minutes, Once as needed, severe hypersensitivity / infusion reaction (grade 3), including hypoxemia, dyspnea, bradycardia or tachycardia, chest pain/ pressure, cognitive changes, systolic BP 80-90 mmHg, generalized rash, Starting when released, Until Discontinued
Dilute with 10 mL of 0.9% Normal Saline.
IV Push over at least 2 minutes; (if not given within the last 6 hours)
Last released: Never
- ✓  **diphenhydramine (BENADRYL) injection 50 mg**
50 mg, intravenous, Once as needed, severe hypersensitivity / infusion reaction (grade 3), including hypoxemia, dyspnea, bradycardia or tachycardia, chest pain/ pressure, cognitive changes, systolic BP 80-90 mmHg, generalized rash, Starting when released, Until Discontinued
If not given within past 2 hours
If patient has severe hypotension, give after hypotensive episode is resolved
Use with caution in patients over 60 years of age, or history of asthma
Last released: Never
- ✓  **diphenhydramine (BENADRYL) injection 25 mg**
25 mg, intravenous, Once as needed, moderate hypersensitivity / infusion reaction (grade 2) including flushing, dizziness, back pain, rigors, localized rash/hives, pruritis, nausea, vomiting, abdominal cramping, temperature greater than 100.5, uneasiness, agitation, feeling of impending doom, Starting when released, Until Discontinued
Use with caution in patients over 60 yrs of age, or history of asthma
Last released: Never
- ✓  **hydrocortisone sod succ (PF) injection 100 mg**
100 mg, intravenous, Once as needed, severe hypersensitivity / infusion reaction (grade 3), including hypoxemia, dyspnea, bradycardia or tachycardia, chest pain/ pressure, cognitive changes, systolic BP 80-90 mmHg, generalized rash, Starting when released, Until Discontinued
Last released: Never
- ✓  **Oxygen Therapy, Adult - Device: Nasal Cannula**
STAT, As needed Starting when released Until Specified
Device: Nasal Cannula
Keep O2 Sat Above: 90%