



Print Patient Name (Required)

DOB

Height (cm):
Weight (kg):
BSA (m2):
Allergies:

Place Patient Barcode Here

Tocilizumab (Actemra) Infusion

Admit to: Diagnosis: Infusion Date:

- Port Broviac PICC Peripheral
Normal Saline/Heparin flush per protocol
Topical anesthetic per protocol

Premedication

- Acetaminophen = mg PO (max dose 1000 mg)
Diphenhydramine = mg IV or PO (max dose 50 mg)
Other:

Tocilizumab mg IV in NS over 1 hour

Nursing Orders

- Weigh patient prior to infusion.
Monitor Vital Signs at the beginning and the end of the infusion.
Obtain the following labs with IV or central line access prior to the start of infusion:
CBC CMP BMP ALT AST UA IGG IGG/IGA/IGM Other:
Call lab results prior to starting infusion
Fax all lab results to ordering provider
Discharge once infusion completed Discharge 30 minutes post infusion

PRN medications:

- Diphenhydramine (1mg/kg) = mg IV or PO once prn itching
Ibuprofen (10 mg/kg) = mg PO once prn mild pain/temp>100.4 (call for fever prior to administering)
Acetaminophen (15mg/kg)= mg PO once prn mild pain/temp>100.4 (call for fever prior to administering)
Ondansetron (0.15 mg/kg) = mg IV once prn nausea

Orders good until this date: Infusion Frequency:

Provider's Signature: Date: Time:

Printed Name:

