



Print Patient Name (Required)

DOB

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

Place Patient Barcode Here

Gamunex-C 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)
Methylprednisolone = mg IV
Diphenhydramine = mg IV or PO (max dose 50 mg)
Other:
Ondansetron = mg IV or PO

Gamunex-C grams IV once

- For all patients receiving their first or second infusion, and for all patients under 8 years of age after two infusions without problems: 10ml/hr X 15 minutes, 20ml/hr X 15 minutes, 40ml/hr X15 minutes, 80ml/hr X 15 minutes 120ml/hr until completed
For all patients 8 years of age and older after two infusions without problems: 20ml/hr X 15 minutes, 40ml/hr X 15 minutes, 80ml/hr X 15 minutes, 160ml/hr until completed
Follow above ordered titrations but continue advancing until ml/hr is reached
Titration orders if different than above:

Nursing Orders

- Weigh patient prior to infusion.
Monitor Vital Signs at the beginning, Q15 minutes for 1 hour and then hourly, and at 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
Acetaminophen (15mg/kg) = mg PO once prn mild pain/temp>100.4 (call for fever prior to administering)

Orders good until this date: Infusion Frequency:

Provider's Signature: Date: Time:

Printed Name:

