

## **Division of Gastroenterology Inflammatory Bowel Disease Consultation and Research Unit**



## **Patient Care Orders IBD Infliximab Administration Order**

1.	Check	Caution	Sheet for	anv	allergies	before	ordering

4. Do not use prohibited abbreviations.

STAT / URGENT Use checkbox for medication orders ONLY

## Standing Order for administering Chimeric Antibody to Tumor Necrosis Factor (TNF) alpha (Infliximab, Remicade®, Inflectra®)

yyyy-Mon-dd	Time							
		1. Pre-Infusion						
		Pulse, blood pressure sitting						
		2. Infusion Instruction  Pre-medication:						
	☐ Diphenhydramine (Benadryl®) mg IV ☐ Hydrocortisone (Solucortef®) mg IV ☐ Other							
□ None								
		Infuse mg Remicade, mixed in 250 mL 0.9% Sodium Chloride IV over 2 hours (Commence infus						
			@ '	75 mL/hrx10 min, 100 mL/hr X 10 minx, 125 mL/hr X 10 mins and then 125 mL/hr until completion)				
			IF /	ADVERSE REACTION to Infliximab follow the instructions below:				
				- Stop infusion, and maintain 0.9% Sodium Chloride @ 150 mL/hr				
				- Administer for:				
				a. Mild to moderate itching and/or rash, hives WITHOUT Respiratory Difficulty (10-25% Incidence)				
				<ul> <li>Administer diphenhydramine (Benadryl®) 50mg IV STAT</li> </ul>				
				- Administer Acetaminophen 500 mg PO				
				b. Itching and/or hives WITH Respiratory Difficulty or Wheezing (1-2% Incidence)				
		<ul> <li>Administer diphenhydramine (Benadryl) 50 mg IV STAT</li> </ul>						
		- Start oxygen 5 L/min						
		c. Anaphylactic Reaction (Rare Incidence)  - Administer 1:10,000 epinephrine 0.3 mg SC STAT  - Start oxygen 2-5 L/min  - Solucortef 100mg IV STAT  - Page physician STAT						
		- Page physician to inform him/her of adverse reaction						
		<ul> <li>Once infusion reaction resolved resume infusion at one half initial infusion rate (75mL/hr)</li> </ul>						
		3. Post-Infusion						
		<ul> <li>Pulse, blood pressure sitting</li> </ul>						
				<ul> <li>Patient can be discharged home after infusion and vital signs completed</li> </ul>				

Medication orders must include drug, dose, route, frequency, and if applicable, duration.
 If the medication order is STAT or URGENT, notify RN and place a large∑ In the STAT/URGENT box at right.