# Regimen Reference Order – LYMP – riTUXimab maintenance

**To order this therapy in ARIA, refer to ADDITIONAL INFORMATION**

**Planned Course:** Every 12 weeks for 8 doses (2 years)
**Indication for Use:** Indolent Non-Hodgkin Lymphoma, Maintenance Therapy

**CVAD: At Provider's Discretion**

***Proceed with treatment if:***

***ANC equal to or greater than 1.2 x $10^9$/L AND Platelets equal to or greater than 75 x $10^9$/L***

- **Contact Hematologist if parameters not met**

***Note:** Hepatitis B serology results must be reviewed in accordance with CCMB Policy Hepatitis B Monitoring for Oncology and Hematology Patients*

## SEQUENCE OF MEDICATION ADMINISTRATION

### Pre-treatment Requirements

| Drug | Dose | CCMB Administration Guideline |
|---|---|---|
| Not Applicable | | |

### Treatment Regimen – LYMP – riTUXimab maintenance

**Establish primary solution 500 mL of: normal saline**

| Drug | Dose | CCMB Administration Guideline |
|---|---|---|
| **SUBCUTANEOUS riTUXimab** | | |
| cetirizine | 10 mg | Orally 30 minutes prior to riTUXimab |
| acetaminophen | 650 mg | Orally 30 minutes prior to riTUXimab |
| **Wait 30 minutes after completion of IV pre-medications before starting riTUXimab** | | |
| riTUXimab (Subcutaneous) | 1400 mg (1400 mg = 11.7 mL) | **Subcutaneous**: Administer over 5 minutes into abdomen<br>Syringe should be held in hand for 5 minutes to warm up and decrease viscosity<br>Use 25G needle<br>**Nursing Alert:* *Ensure subcutaneous riTUXimab formulation is used*<br>**Alert:* *rapid infusion and subcutaneous route not to be used for riTUXimab naïve patients* |
| **OR** | | |
| **INTRAVENOUS riTUXimab** | | |
| cetirizine | 10 mg | Orally 30 minutes prior to riTUXimab |
| acetaminophen | 650 mg | Orally 30 minutes prior to riTUXimab |
| **Wait 30 minutes after completion of IV pre-medications before starting riTUXimab** | | |

| | | |
|---|---|---|
| riTUXimab<br>(IV brand name specific) | 375 mg/m$^2$ | **<u>Slow infusion</u>: (if equal to or less than 6 months since last riTUXimab dose):** IV made up to a final concentration of 1 mg/mL in normal saline. Start at 100 mg/hr for 30 minutes and escalate infusion rate in 100 mg/hr increments every 30 minutes to maximum of 400 mg/hr<br>**Nursing Alert: IV tubing is primed with riTUXimab*<br>**Alert: Ensure brand name on prescription label (indicated in brackets on prescription label) matches prescribed order*<br>**Alert: Pharmacy to ensure final volume on label*<br>**OR**<br>**<u>Slow infusion</u>: (if greater than 6 months since last riTUXimab dose):** IV made up to a final concentration of 1 mg/mL in normal saline. Start at 50 mg/hr for 60 minutes and escalate infusion rate in 50 mg/hr increments every 30 minutes to maximum of 400 mg/hr<br>**Nursing Alert: IV tubing is primed with riTUXimab*<br>**Alert: Ensure brand name on prescription label (indicated in brackets on prescription label) matches prescribed order*<br>**Alert: Pharmacy to ensure final volume on label*<br>**OR**<br><u>**Rapid infusion**</u>: IV in normal saline over 90 minutes: Infuse 50 mL of a 250 mL bag (or 100 mL of a 500 mL bag) over 30 minutes, then infuse the remaining 200 mL (or 400 mL of a 500 mL bag) over 60 minutes<br>**Alert: rapid infusion and subcutaneous route not to be used for riTUXimab naïve patients*<br>**Alert: Ensure brand name on prescription label (indicated in brackets on prescription label) matches prescribed order*<br>**Alert: Pharmacy to ensure final volume on label* |

**In the event of an infusion-related hypersensitivity reaction,** refer to the '**Hypersensitivity Reaction Standing Order'**

## REQUIRED MONITORING

Hepatitis B serology

- Hepatitis B surface antigen and Hepatitis B core antibody (drawn within preceding 5 years)

All Cycles

- CBC as per Physician Orders

INTRAVENOUS riTUXimab

- Full vital signs (temperature, heart rate, respiratory rate, blood pressure and $O_2$ saturation) at baseline and as clinically indicated
- No observation period is required after riTUXimab administration. Patient can be discharged from treatment room if stable whether they had a reaction or not

SUBCUTANEOUS riTUXimab

- Full vital signs (temperature, heart rate, respiratory rate, blood pressure and $O_2$ saturation) at baseline, <u>at discharge</u>, and as clinically indicated
- **15-minute observation period required after <u>each dose</u>**

## Recommended Support Medications

| Drug | Dose | CCMB Administration Guideline |
|---|---|---|
| None required | | |

## DISCHARGE INSTRUCTIONS

- Patients should be instructed to contact their cancer team immediately if symptoms of hypersensitivity reactions occur after discharge

## ADDITIONAL INFORMATION

- Due to the risk of reactivation of Hepatitis B virus (HBV) while on this treatment regimen, prescriber must adhere to CCMB Policy ***Hepatitis B Monitoring for Oncology and Hematology Patients*** for ordering and interpreting HBV serology and prescribing antiviral prophylaxis
- Administering nurse must document any infusion-related reactions with any dose of riTUXimab
- Ensure there were no **Grade 3 or 4** infusion-related reaction with the previous dose prior to administering riTUXimab via Subcutaneous injection or Rapid Infusion
- Intravenous riTUXimab formulation is available from more than one manufacturer and uses several different brand names. Brand name will be indicated in brackets after riTUXimab. **Ensure prescription label matches the brand name on prescribed order for intravenous riTUXimab**
- **ARIA ordering**: Support protocols are available under **riTUX slow IV maint, riTUX rapid IV maint and riTUX subcut maint.** in the "Lymphoma" folder