Regimen Reference Order – LYMP - FERRERI

Planned Course: **Every 21 days for 4 cycles**
Indication for Use: **Primary CNS Lymphoma**

CVAD: Preferred (VESICANT INVOLVED)

Proceed with treatment if:
Proceed with riTUXimab regardless of blood counts

SEQUENCE OF MEDICATION ADMINISTRATION

Pre-treatment Requirements

Drug	Dose	CCMB Administration Guideline
Not Applicable		

Treatment Regimen – LYMP - FERRERI

Drug	Dose	CCMB Administration Guideline
Cycle 1		
Day minus 5		
Establish primary solution 500 mL of: normal saline		
acetaminophen	650 mg	Orally 30 minutes prior to riTUXimab
dexamethasone	20 mg	IV in normal saline 50 mL over 15 minutes
diphenhydrAMINE	50 mg	IV in normal saline 50 mL over 15 minutes
riTUXimab	375 mg/m^2	**Slow infusion (if no previous rituximab)**: 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 **Nursing Alert: IV tubing is primed with riTUXimab*
Day 0		
acetaminophen	650 mg	Orally 30 minutes prior to riTUXimab
dexamethasone	12 mg	IV in normal saline 50 mL over 15 minutes
diphenhydrAMINE	50 mg	IV in normal saline 50 mL over 15 minutes
riTUXimab	375 mg/m^2	**Slow infusion:** 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 **Nursing Alert: IV tubing is primed with riTUXimab* **OR** **Rapid infusion**: 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 *Concentration dependent drug: Pharmacy will adjust diluent volume to ensure drug stability*

Cycles 2 to 4		
Day minus 5 and Day 0		
acetaminophen	650 mg	Orally 30 minutes prior to riTUXimab
dexamethasone	12 mg	IV in normal saline 50 mL over 15 minutes
diphenhydrAMINE	50 mg	IV in normal saline 50 mL over 15 minutes
riTUXimab	375 mg/m^2	**Slow infusion:** 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 **Nursing Alert: IV tubing is primed with riTUXimab* **OR** **Rapid infusion**: 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 *Concentration dependent drug: Pharmacy will adjust diluent volume to ensure drug stability*
All Cycles		
Days 1 to Day 3		
Patients will be admitted to hospital for methotrexate (Day 1), cytarabine (Days 2 and 3). Follow inpatient orders		
All doses will be automatically rounded that fall within the DSG Approved Dose Bands. See LYMP DSG – Dose Banding document for more information		

Flush after each medication:

- 50 mL over 6 minutes (500 mL/hr)

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

REQUIRED MONITORING (Outpatient)

riTUXimab monitoring

- Full vital signs (temperature, heart rate, blood pressure, respiration and O_2 saturation) prior to each dose and as clinically indicated
- No observation period is required
- Patient can be discharged from treatment room if stable whether they had a reaction or not

Recommended Support Medications

Drug	Dose	CCMB Administration Guideline
Grastofil®	5 mcg/kg (rounded to nearest 300 mcg or 480 mcg)	Subcutaneously once daily for 7 days to start on Day 6

DISCHARGE INSTRUCTIONS

- Patients should be instructed to contact their cancer team immediately if symptoms of hypersensitivity reactions occur after discharge
- Advise patient to contact Leukemia/BMT physician on call if encounter problems
- Reinforce applicable safe handling precautions of medications, blood and body fluids for 48 hours after completion of chemotherapy

ADDITIONAL INFORMATION

- Refer to inpatient FERRERI orders for treatment given in hospital
- riTUXimab may be administered in the outpatient or inpatient setting
- 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 Rapid Infusion
- riTUXimab Rapid Infusion not to be given on first dose (Cycle 1, Day minus 5)