

## Cottage Grove Infusion 1515 Village Drive Cottage Grove, OR 97424 Phone 541-767-5447 Fax 541-767-5399 E-Fax 541-434-3164

## TBO-FILGRASTIM (Granix) Injection (v. 05/16/2024)

Diagnosis/Indication (ICD-10):  Patient Weight		<del></del>
Medication:		
TBO-filgrastim 5 mcg/kg subcutaneous daily (Dose greater than or equal to 390 mcg should round up to 480		uld round down to 300 mcg. Doses calculated t
Nursing communications:		
Vital signs: as needed		
Emergency Medications:		
DiphenhydrAMINE (BENADRYI.) 25 to 50 mg IV as a diaphoresis, fever, palpitations, chest discomfort, blood pr		
Administer 25 mg IV once, if reaction does not resolution resol	lve in 3 minutes may repeat 25 mg	IV dose for a total of 50 mg and contact
MethylPREDNISolone sodium succinate (Solu-MED symptoms of mild to moderate drug reaction (flushing, diz blood pressure changes (>/= 20 points in SBP), nausea, urt administration of diphenhydramine (Benadryl). Contact pr	ziness, headaches, diaphoresis, fever icaria, chills, pruritic) that worsen or	r, palpitations, chest discomfort,
Epinephrine 0.3 mg IM once for anaphylaxis. If total of 0.6 mg. Avoid use of hand, foot, leg veins in elderlif given.		
■ Famotidine (PEPCID) 20 mg IV once as needed for in	fusion/ allergic reaction	
■ Emergency medications can be given IM if IV route	unavailable	
tient name:	Provider printed name	e:
DB:	Provider signature: _	
ight Weight	Date:	Time: