



**Cottage Grove Infusion**  
**1515 Village Drive**  
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**Cabotegravir and Rilpivirine (Cabenuva) for treatment of HIV (v. 05/16/2024)**

[x] Admit as series patient.

Cabotegravir and rilpivirine injections are currently available at the RIC with the following restrictions:

- Diagnosis of HIV
- Prescribed by an Infectious Diseases specialist
- Order must be renewed annually

<input type="checkbox"/>	<p><b>Monthly Regimen</b></p> <p>[x] Cabotegravir 600 mg injection and Rilpivirine 900 mg injection IM x 1</p> <ul style="list-style-type: none"> <li>• Loading dose</li> <li>• Administered as two IM injections in gluteal region on opposite sides</li> </ul> <p>[x] Cabotegravir 400 mg injection and Rilpivirine 600 mg injection IM every month</p> <ul style="list-style-type: none"> <li>• Maintenance dose</li> <li>• Administered as two IM injections in gluteal region on opposite sides</li> <li>• May be given up to 7 days before or after the date of the scheduled monthly injection</li> </ul> <p><input type="radio"/> <b>If patient over 7 days late for scheduled injection, hold further injections until evaluated by ID provider</b></p>
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<input type="checkbox"/>	<p><b>Every 2 months Regimen</b></p> <p>[x] Cabotegravir 600 mg injection and Rilpivirine 900 mg injection IM every month x 2 doses</p> <ul style="list-style-type: none"> <li>• Loading dose = 2 doses 1 month apart</li> <li>• Administered as two IM injections in gluteal region on opposite sides</li> </ul> <p>[x] Cabotegravir 600 mg injection and Rilpivirine 900 mg injection IM every 2 months</p> <ul style="list-style-type: none"> <li>• Maintenance dose</li> <li>• Administered as two IM injections in gluteal region on opposite sides</li> <li>• Begin 2 months after the 2<sup>nd</sup> loading dose</li> <li>• May be given up to 7 days before or after the date of the scheduled bimonthly injection</li> </ul> <p><input type="radio"/> <b>If patient over 7 days late for scheduled injection, hold further injections until evaluated by ID provider</b></p>
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**Emergency Medications:**

- DiphenhydrAMINE (BENADRYL) 25 to 50 mg IV as needed for mild to moderate drug reactions (flushing, dizziness, headaches, diaphoresis, fever, palpitations, chest discomfort, blood pressure changes (>/= 20 points in SBP), nausea, urticaria, chills, pruritic).  
 -- Administer 25 mg IV once, if reaction does not resolve in 3 minutes may repeat 25 mg IV dose for a total of 50 mg and contact provider.
- MethylPREDNISolone sodium succinate (Solu-MEDROL) 125 mg IV once as needed for shortness of breath, continued symptoms of mild to moderate drug reaction (flushing, dizziness, headaches, diaphoresis, fever, palpitations, chest discomfort, blood pressure changes (>/= 20 points in SBP), nausea, urticaria, chills, pruritic) that worsen or persist 5 minutes after administration of diphenhydramine (Benadryl). Contact provider if given.
- Epinephrine 0.3 mg IM once for anaphylaxis. If reaction does not resolve in 3 minutes may repeat 0.3 mg IM dose for a total of 0.6 mg. Avoid use of hand, foot, leg veins in elderly patient and those with occlusive vascular disease. Contact provider if given.
- Famotidine (PEPCID) 20 mg IV once as needed for infusion/ allergic reaction\
- Emergency medications can be given IM if IV route unavailable

Patient name: \_\_\_\_\_

Provider printed name: \_\_\_\_\_

DOB: \_\_\_\_\_

Provider signature: \_\_\_\_\_

Height \_\_\_\_\_ Weight \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_