

Height _____ Weight _____

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Therapeutic Phlebotomy Order Set (v. 05/24/2024)

Diagnosis/Indication (ICD-10):		
Medicati		
	Sodium chloride 0.9% bolus 250 mLIV over 15 minutes after phlebotomy	
	Sodium chloride 0.9% bolus 500 mLIV over 30 minutes after phlebotomy	
	If patient symptomatic post phlebotomy, sodium chloride 0.9% bolus 500 mI	.IV over 30 minutes pm lightheaded or dizzy
Nursing c	g communications: Vital signs: before, after, and as needed during procedure	
n	Therapeutic phlebotomy: Volume remove	Frequency:
	Serial patient: hold phlebotomy until next scheduled appointment for hemogl	obin less than
	Serial patient: phlebotomize for hemoglobin over	
Access:		
	Insert peripheral IV – Every visit, remove after IV administration complete	
	 Access & Use Central Line / CVAD Initiate Central Line (Non-PICC) Maintenance Protocol Heparin, porcine (PF) 100 unit/mL flush 5 mL as needed for Port-a-Cath line care Alteplase (Cathflo) 2 mg as needed for occluded catheter. For clearing central line catheter- retain in catheter for 30 minutes to 2 hours, instill a 2nd dose if occluded 	
	 Access & Use PICC Initiate PICC Maintenance Protocol Normal saline flush 3 mL as needed for PICC/ Hickman line care Alteplase (Cathflo) 2 mg as needed for occluded catheter. For clearing central line catheter- retain in catheter for 30 minutes to 2 hours, instill a 2nd dose if occluded 	
Emergen	ency 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.		
20 pc	MethylPREDNISolone sodium succinate (Solu-MEDROL) 125 mg IV once Id to moderate drug reaction (flushing, dizziness, headaches, diaphoresis, fev points in SBP), nausea, urticaria, chills, pruritic) that worsen or persist 5 minu ntact provider if given.	er, palpitations, chest discomfort, blood pressure changes (>/=
_ Avoi	Epinephrine 0.3 mg IM once for anaphylaxis. If reaction does not resolve old use of hand, foot, leg veins in elderly patient and those with occlusive vas	
■ Famotidine (PEPCID) 20 mg IV once as needed for infusion/ allergic reaction.		
•	■ May give emergency medications IM if IV route unavailable	
Patient na	name: Provid	er printed name:
DOB:	Provid	er signature:

Date: _____ Time: ____