



Change order details by crossing out unwanted information and writing in desired details/instructions.
Place a line through the to remove the pre-checked option.

GOLIMUMAB (SIMPONI ARIA) INITIATION INFUSION [11500269] Therapy Plan To Be Used In Infusion Center

Infusion Center Location: _____ Start Date: _____

Diagnosis/Indication: _____

Authorization Number: _____

Patient Name _____ DOB _____ Height _____ Weight _____

Supportive Care	Interval
<input type="checkbox"/> GOLIMUMAB IVPB Route: _____ <i>Starting when released, For 1 dose, Use an infusion set with an in-line low protein-binding 0.22 micron filter. Do not infuse in the same line with other medications.</i> Dose _____ Frequency _____	

Pre-Medications	Interval	Route
<input type="checkbox"/> acetaminophen (TYLENOL) tablet 650 mg <i>Once Starting when released, For 1 dose</i>	Every visit	Oral
<input type="checkbox"/> diphenhydrAMINE (BENADRYL) capsule 25 mg <i>Once Starting when released, For 1 dose, IV or PO</i>	Every visit	Oral
<input type="checkbox"/> diphenhydrAMINE (BENADRYL) injection 25 mg <i>Once Starting when released, For 1 dose, IV or PO</i>	Every visit	IV

Provider Communication Orders	Interval
<input type="checkbox"/> Provider Communication <i>Starting when released Select most appropriate orders (one set only) for IV access / central line - if selecting a central line access set of orders, then de-select IV access.</i>	Once

Nursing Orders	Interval	
<input type="checkbox"/> Nursing Communication <i>Starting when released Patients should be evaluated for tuberculosis risk factors and latent tuberculosis infection (with a tuberculin skin test) prior to and during therapy.</i>	Once	
<input type="checkbox"/> Insert peripheral IV <i>Starting when released</i>	PRN	
<input type="checkbox"/> Access & Use Central Line/CVAD <i>Starting when released Access vascular device and confirm patency.</i>	PRN	
<input type="checkbox"/> Access & Use Central Line/CVAD <i>Starting when released Access vascular device and confirm patency.</i>	PRN	
<input type="checkbox"/> sodium chloride (NS) flush 10 mL <i>Line Care, Starting when released</i>	PRN	Route: IV
<input type="checkbox"/> Initiate Central Line (Non-PICC) Maintenance Protocol <i>Starting when released</i>	PRN	

Provider Signature _____ EHR User ID _____ Date _____ Time _____

Initials _____

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<input type="checkbox"/>	Initiate PICC Maintenance Protocol <i>Starting when released</i>	PRN	
<input type="checkbox"/>	sodium chloride 0.9 % injection 10 mL <i>Other, Line Care prior to medication administration, Starting when released</i>	PRN	Route: IV
<input type="checkbox"/>	Nursing Communication <i>Starting when released Change PICC line dressing weekly and as needed.</i>	PRN	
<input type="checkbox"/>	sodium chloride 0.9 % injection 10 mL <i>Other, Line Care post medication administration, Starting when released</i>	PRN	Route: IV
<input type="checkbox"/>	sodium chloride 0.9 % injection 10 mL <i>Other, Line Care prior to medication administration, Starting when released</i>	PRN	Route: IV
<input type="checkbox"/>	sodium chloride 0.9 % injection 20 mL <i>Other, Line Care post lab draw, Starting when released</i>	PRN	Route: IV
<input type="checkbox"/>	sodium chloride 0.9 % injection 10 mL <i>Other, Line Care post medication administration, Starting when released</i>	PRN	Route: IV
<input type="checkbox"/>	sodium chloride 0.9 % injection 10 mL <i>Other, Line Care at discharge and de-access, Starting when released</i>	PRN	Route: IV
<input type="checkbox"/>	sodium chloride 0.9 % injection 20 mL <i>Other, Line Care post lab draw, Starting when released</i>	PRN	Route: IV
<input type="checkbox"/>	heparin, porcine (PF) 100 unit/mL flush 500 Units <i>Line Care, for de-access, Starting when released</i>	PRN	Route: IV
<input type="checkbox"/>	alteplase (CATHFLO) injection 2 mg <i>Other, Line Care, Starting when released, For 2 dose, For clearing central line catheter. Add 2.2 mL sterile water for injection to vial; let the vial stand undisturbed to allow large bubbles to dissipate. Mix by gently swirling until completely dissolved (complete dissolution should occur within 3 minutes); do not shake. Final concentration: 1 mg/mL. Retain in catheter for 30 minutes to 2 hours, instill a 2nd dose if occluded.</i>	PRN	Route: Intra-Catheter
<input type="checkbox"/>	alteplase (CATHFLO) injection 2 mg <i>Other, Line care, Starting when released, For 2 dose, For clearing central line catheter. Add 2.2 mL sterile water for injection to vial; let the vial stand undisturbed to allow large bubbles to dissipate. Mix by gently swirling until completely dissolved (complete dissolution should occur within 3 minutes); do not shake. Final concentration: 1 mg/mL. Retain in catheter for 30 minutes to 2 hours, instill a 2nd dose if occluded</i>	PRN	Route: Intra-Catheter

PRN Medications		Interval	
<input type="checkbox"/>	sodium chloride (NS) flush 10 mL <i>10 mL As Needed IV Line Care, Starting when released</i>	PRN	Route: IV
<input type="checkbox"/>	sodium chloride 0.9 % bolus 500 mL <i>500 mL Once As Needed IV Line Care, Starting when released, Run at TKO (25ml/hr)</i>	PRN	Route: IV

Emergency Medications		Interval	
<input type="checkbox"/>	diphenhydrAMINE (BENADRYL) injection 25-50 mg <i>25 to 50 mg Once As Needed IV Other, For mild to moderate drug reactions (flushing, dizziness, headache, diaphoresis, fever, palpitations, chest discomfort, blood pressure changes (>= 20 points in SBP), nausea, urticaria, chills, pruritis), For 1 dose, Administer 50 mg IV if patient has NOT had diphenhydramine within 2 hours of reaction. Administer 25 mg IV if patient has had diphenhydramine within 2 hours of reaction, if reaction doesn't resolve in 3 minutes may repeat 25mg IV dose for a total of 50 mg, and notify provider</i>	PRN	Route: IV

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Initials			

Place Patient Label Here	Page 2 of 3	EHR0990-DT (01/05/2024)
	GOLIMUMAB (SIMPONI ARIA) INITIATION INFUSION	
	Prog & Orders	

<input type="checkbox"/>	albuterol 90 mcg/actuation inhaler 2 puff <i>2 puff Once As Needed Inhalation Wheezing, Shortness of Breath, wheezing, shortness of breath associated with infusion reaction and notify provider, Starting when released, Administer with a spacer if available.</i>	PRN	Route: Inhalation
<input type="checkbox"/>	methyIPREDNISolone sodium succinate (Solu-MEDROL) injection 125 mg <i>125 mg Once As Needed IV For shortness of breath for continued symptoms of mild to moderate drug reactions (flushing, dizziness, headache, diaphoresis, fever, palpitations, chest discomfort, blood pressure changes (>= 20 points in SBP), nausea, urticaria, chills, pruritis) that worsen or persist after administration of diphenhydramine (Benadryl), and notify provider, Starting when released, For 1 dose</i>	PRN	Route: IV
<input type="checkbox"/>	EPINEPHrine (ADRENALIN) injection 0.5 mg <i>0.5 mg Once As Needed Intramuscular Other, For severe drug reaction (flushing, dizziness, headache, diaphoresis, fever, palpitations, chest discomfort plus blood pressure changes (>= 40 points in SBP), shortness of breath with wheezing and O2Sat <90%), and notify provider, For 1 dose</i>	PRN	Route: Intramuscular

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