



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.

USTEKINUMAB (STELARA) THERAPY PLAN [11500629] Therapy Plan To Be Used In Infusion Center

Infusion Center Location: _____ Start Date: _____

Diagnosis/Indication: _____

Authorization Number: _____

Patient Name _____ DOB _____ Height _____ Weight _____

Provider Communication Orders	Interval
<input type="checkbox"/> Physician Communication <i>Starting when released Order one CBC with Differential, CMP, CRP, ESR, and tuberculosis screening test prior to patient starting treatment.</i>	Once

<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
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Supportive Care	Interval	Route:
<input type="checkbox"/> USTEKINUMAB (STELARA) INFUSION <i>Starting when released, For 1 dose</i> Dose _____ Frequency _____		

Labs	Interval
<input type="checkbox"/> Complete Blood Count with Automated Differential <i>Starting when released</i>	Once
<input type="checkbox"/> Comprehensive Metabolic Panel <i>Starting when released</i>	Once
<input type="checkbox"/> C-Reactive Protein <i>Starting when released</i>	Once
<input type="checkbox"/> Sedimentation Rate, Westergren <i>Starting when released</i>	Once
<input type="checkbox"/> Treatment Lab Instructions <i>Starting when released Nursing to release the following labs: -CBC with Differential, -CMP, -C-Reactive Protein, -Sedimentation Rate, westergren, Provider approves to Release and Draw labs 2 days Pre & Post this Planned Treatment Date.</i>	PRN

Nursing Orders	Interval
<input type="checkbox"/> Nursing Communication <i>Starting when released Vital signs prior to infusion and every 30 minutes during infusion and 1/2 post infusion. Call provider for: Systolic BP < 80 or >200mmHg, Pulse <50 or >130 bpm, Temp > 38.3 C, If stable 1/2 hour post infusion, discharge patient home on usual home medication,</i>	Once
<input type="checkbox"/> Nursing Communication <i>Starting when released Future subcutaneous doses of Ustekinumab are no longer covered in the infusion center population, this is considered a self-administered medication.</i>	Once

Provider Signature _____ EHR User ID _____ Date _____ Time _____

Initials _____

Place Patient Label Here

<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	
<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

Pre-Medications

Interval

Provider Signature

EHR User ID

Date

Time

Initials

Place Patient Label Here

