



Patient Name
DOB
MRN
Physician
CSN

Defaults for orders not otherwise specified below:

- INDUCTION DOSES:** Interval: Every 21 days x 2 treatments on Days 0 and 21
- MAINTENANCE DOSE:** Interval: Every 21 days x 6 treatments (start day 42)

Duration:

- 8 treatments (total)
- 6 treatments (maintenance doses)
- Until date: _____
- # of Treatments _____

Anticipated Infusion Date _____ ICD 10 Code with Description _____

Height _____ (cm) Weight _____ (kg) Allergies _____

Site of Service

- SH Gerber
- SH Helen DeVos (GR)
- SH Lemmen Holton (GR)
- SH Ludington
- SH Pennock
- SH Reed City
- SH United Memorial
- SH Zeeland

Provider Specialty

- Allergy/Immunology
- Cardiology
- Gastroenterology
- Genetics
- Infectious Disease
- Internal Med/Family Practice
- Nephrology
- Neurology
- OB/GYN
- Other
- Otolaryngology
- Pulmonary
- Rheumatology
- Surgery
- Urology
- Wound Care

Appointment Requests

- Infusion Appointment Request**
Status: Future, Expected: S, Expires: S+365, Sched. Tolerance: Schedule appointment at most 3 days before or at most 3 days after Infusion and possible labs

Safety Parameters and Special Instructions

- ONC SAFETY PARAMETERS AND SPECIAL INSTRUCTIONS 3**
TEPREOTUMUMAB (TEPEZZA): Infuse over 90 minutes for the first 2 infusions; may reduce infusion time to 60 minutes for subsequent infusions if well tolerated. Do NOT administer as IV push or bolus. Females of reproductive potential should use effective contraception prior to treatment, during therapy and for 6 months after the last dose of teprotumumab. Monitor for signs and symptoms of infusion reactions (eg, increased BP, feeling hot, tachycardia, dyspnea, headache, muscular pain); blood glucose. Monitor patient during infusion and for 90 minutes post-treatment for infusion reactions. Consider pre-medicating for subsequent treatments in patients who experienced infusion reactions. Monitor patients with inflammatory bowel disease for exacerbation.

Nursing Orders

- ONC NURSING COMMUNICATION 100**
May Initiate IV Catheter Patency Adult Protocol
- ONC NURSING COMMUNICATION 22**
Observe patient in the infusion center for a minimum of 90 minutes following completion of infusion.

Vitals

- Vital Signs**
Routine, PRN Starting when released Until Specified
Take vital signs at initiation and completion of infusion and as frequently as indicated by patient's symptoms

Labs

- Basic Metabolic Panel (BMP)**
URGENT, Clinic Collect, Status: Future, Expected: S, Expires: S+365

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NOTE: Epic Treatment/Therapy Plan Orders. To be scanned/attached to the appropriate Infusion Referral Order in Epic.

Confidentiality of this medical record shall be maintained except when use or disclosure is required or permitted by law, regulation, or written authorization by the patient.



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Pre-Medications

PREMED: For patients with history of infusion reaction consider adding premedication

ONC PROVIDER REMINDER 7
HISTORY OF INFUSION REACTION: consider adding pre-medication

acetaminophen (TYLENOL) tablet 650 mg
650 mg, Oral, Once, Starting at treatment start time
Administer 30 minutes prior to treatment

diphenhydrAMINE (BENADRYL) injection 25 mg
25 mg, Intravenous, Once, Starting at treatment start time
Administer 30 minutes prior to treatment

Medication (INDUCTION INITIAL DOSE on Day 0)

	Interval	Duration
<input checked="" type="checkbox"/> TEPROTUMUMAB: In 100 mL for doses less than 1800 mg and 250 mL for doses greater than or equal to 1800 mg		
<input checked="" type="checkbox"/> teprotumumab-trbw (Tepezza) 10 mg/kg in sodium chloride 0.9% 100 mL OR 250 mL IVPB 10 mg/kg, Intravenous, Administer over 90 Minutes, Once, Starting at treatment start time Infuse over 90 minutes for the first 2 infusions; may reduce infusion time to 60 minutes for subsequent infusions if well tolerated. Do NOT administer as IV push or bolus	Once	1 treatment

Medication (INDUCTION SECOND DOSE on Day 21)

	Interval	Duration
<input checked="" type="checkbox"/> TEPROTUMUMAB: In 100 mL for doses less than 1800 mg and 250 mL for doses greater than or equal to 1800 mg		
<input checked="" type="checkbox"/> teprotumumab-trbw (Tepezza) 20 mg/kg in sodium chloride 0.9% 100 mL OR 250 mL IVPB 20 mg/kg, Intravenous, Administer over 90 Minutes, Once, Starting at treatment start time Infuse over 90 minutes for the first 2 infusions; may reduce infusion time to 60 minutes for subsequent infusions if well tolerated. Do NOT administer as IV push or bolus	Once	1 treatment

Medications (MAINTENANCE DOSES starting Day 42)

	Duration
<input checked="" type="checkbox"/> TEPROTUMUMAB: In 100 mL for doses less than 1800 mg and 250 mL for doses greater than or equal to 1800 mg	
<input checked="" type="checkbox"/> teprotumumab-trbw (Tepezza) 20 mg/kg in sodium chloride 0.9% 100 mL OR 250 mL IVPB 20 mg/kg, Intravenous, Administer over 60 Minutes, Once, Starting at treatment start time Infuse over 90 minutes for the first 2 infusions; may reduce infusion time to 60 minutes for subsequent infusions if well tolerated. Do NOT administer as IV push or bolus	6 treatments

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Telephone order/Verbal order documented and read-back completed. Practitioner's initials _____

NOTE: Unless Order is written DAW (dispense as written), medication may be supplied which is a generic equivalent by nonproprietary name.

TRANSCRIBED:		VALIDATED:		ORDERED:		Pager #
TIME	DATE	TIME	DATE	TIME	DATE	
	Sign		R.N. Sign		Physician Print	Physician

EPIC VERSION DATE: 01-17-21