Physician's Orders
BELIMUMAB (BENLYSTA) - ADULT, OUTPATIENT, INFUSION CENTER
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Defaults for orders not otherwise specified below:
- **INITIAL DOSES:** Interval: Every 14 days x 3 treatments
- **MAINTENANCE DOSES:** Interval: Every 28 days

Duration:
- Until date: _________
- 1 year
- _______# of Treatments

Anticipated Infusion Date___________ ICD 10 Code with Description__________________________

| Height_______(cm) | Weight_________(kg) | Allergies________________________________________ |

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

**Site of Service**
- □ SH Gerber
- □ SH Lemmen Holton (GR)
- □ SH Pennock
- □ SH United Memorial
- □ SH Helen DeVos (GR)
- □ SH Ludington
- □ SH Reed City
- □ SH Zeeland

**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. Verify that all INDUCTION/LOADING DOSES have been scheduled and offset appropriately when scheduling MAINTENANCE DOSES.

**Safety Parameters and Special Instructions**
- ONC SAFETY PARAMETERS AND SPECIAL INSTRUCTIONS 6
  - Verify all INDUCTION/LOADING DOSES given prior to start of MAINTENANCE DOSES

**Nursing Orders**
- ONC NURSING COMMUNICATION 14
  - BELIMUMAB (BENLYSTA):
    - An FDA-approved patient medication guide, which is available with the product information and at http://www.accessdata.fda.gov/drugsatfda_docs/label/2016/125370s055lbl.pdf#page=21, must be dispensed with this medication.
    - Monitor for hypersensitivity reactions; onset may occur within hours of the infusion or may be delayed. Non-acute hypersensitivity reactions, including facial edema, fatigue, headache, myalgia, nausea, and rash have been reported and may occur up to a week following infusion. Immediately discontinue infusion for severe reactions and contact provider.
- ONC NURSING COMMUNICATION 100
  - May Initiate IV Catheter Patency Adult Protocol

**Vitals**
- Vital Signs
  - Routine, PRN, Starting S. Take vital signs at initiation and completion of infusion and as frequently as indicated by patient's symptoms

**CONTINUOUS ON PAGE 2 ➔**

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

- acetaminophen (TYLENOL) tablet
  - 325 mg
  - 500 mg
  - 650 mg
  - 1000 mg
  Oral, Once, Starting S, For 1 Dose

- diphenhydrAMINE (BENADRYL) capsule
  - 25 mg
  - 50 mg
  Oral, Once, Starting S, For 1 Dose

- Pre-medication with dose: __________________________

Medications

- belimumab (BENLYSTA) 10 mg/kg in sodium chloride 0.9 % 250 mL IVPB
  10 mg/kg, Intravenous, Administer over 1 Hour, Once, Starting 30 minutes after treatment start time, For 1 Dose
  Discontinue infusion for severe hypersensitivity reaction (eg, anaphylaxis, angioedema). The infusion may be slowed or temporarily interrupted for minor reactions. Consider premedicating with an antihistamine and antipyretic for prophylaxis against hypersensitivity or infusion reactions.