Physician’s Orders
EDARAVONE (RADICAVA),
INITIAL/SUBSEQUENT - ADULT, OUTPATIENT, INFUSION CENTER

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

Treatment Intent
☐ Conditioning ☐ Curative ☐ Mobilization ☐ Supportive
☐ Control ☐ Maintenance ☐ Palliative

Types: NON-ONCOLOGY SUPPORTIVE CARE
Synonyms: ALS, AMYOTROPHIC LATERAL SCLEROSIS, RADICAVA, NEUROLOGY

### Cycle 1

<table>
<thead>
<tr>
<th>Days</th>
<th>Cycle length: 28 days</th>
</tr>
</thead>
<tbody>
<tr>
<td>1,2,3,4,5,6,7,8,9,10,11,12,13,14</td>
<td>Perform every 1 day x 14</td>
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</tbody>
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**Appointment Requests**

─ **ONCBNCN CALCULATED LENGTH INFUSION APPOINTMENT REQUEST**
  - Interval: Once
  - Occurrences: 14 Treatment Days
  - Expected: S, Expires: S+365, 150 minutes (calculated), No date restriction, clinic performed
  
  EDARAVONE (RADICAVA): ensure there are 14 days between INITIAL CYCLE of 14 daily visits and SUBSEQUENT CYCLES. Patient should have a 14-day drug free period.

**Safety Parameters and Special Instructions**

─ **ONC SAFETY PARAMETERS AND SPECIAL INSTRUCTIONS 4**
  - Interval: Once
  - Occurrences: 14 Treatment Days
  - Comments: EDARAVONE (RADICAVA): CONFIRM that there has been a 14-DAY DRUG FREE PERIOD between each 14-DAY TREATMENT CYCLE OF EDARAVONE.

**Vitals**

─ **VITAL SIGNS**
  - Interval: Every 30 min
  - Occurrences: 14 Treatment Days
  - Comments: Vital signs (HR, RR, BP) prior to therapy, every 30 minutes (at the end of the first bag) x 2, and again 30 minutes after end of infusion (30 minutes after end of second bag).

**Nursing Orders**

─ **ONC NURSING COMMUNICATION 14**
  - Interval: Once
  - Occurrences: 14 Treatment Days
  - Comments: EDARAVONE (RADICAVA): Educate patient about signs of a significant reaction (eg, wheezing; chest tightness; fever; itching; bad cough; blue skin color; seizures; or swelling of face, lips, tongue, or throat). Note: This is not a comprehensive list of all side effects. Patient should consult prescriber for additional questions.

Notify provider if patient experiences signs of hypersensitivity reaction.

CONTINUED ON PAGE 2 ➔

NOTE: Epic Treatment/Therapy Plan Orders. To be scanned/attached to the appropriate Infusion Referral Order in Epic.
EDARAVONE (RADICAVA), INITIAL/SUBSEQUENT - ADULT, OUTPATIENT, INFUSION CENTER (CONTINUED)

Nursing Orders

- **ONC NURSING COMMUNICATION 100**
  - Interval: Until discontinued
  - Occurrences: 14 Treatment Days
  - Comments: May Initiate IV Catheter Patency Adult Protocol

Medications

- **edaravone (RADICAVA) 30 MG/100ML IVPB premix SOLN**
  - Dose: 60 mg
  - Route: Intravenous
  - Once over 60 Minutes for 1 dose
  - Start: S
  - Occurrences: 14 Treatment Days
  - Instructions:
    - Premix. Administer as 2 consecutive 30 mg bags (60 mg total) over 60 minutes total. Do not mix edaravone with other medications. Once overwrap package is opened, use within 24 hours.
    - Do not use if oxygen indicator has turned blue or purple before opening. Promptly discontinue if signs or symptoms of hypersensitivity reaction and contact provider.

Cycles 2 – 6

Days 1,2,3,4,5,6,7,8,9,10

- **ONC NURSING COMMUNICATION 14**
  - Interval: Once
  - Occurrences: 10 Treatment Days
  - Comments: EDARAVONE (RADICAVA): Educate patient about signs of a significant reaction (eg, wheezing; chest tightness; fever; itching; bad cough; blue skin color; seizures; or swelling of face, lips, tongue, or throat). Note: This is not a comprehensive list of all side effects. Patient should consult prescriber for additional questions.
  - Notify provider if patient experiences signs of hypersensitivity reaction.

Appointment Requests

- **ONCBCN CALCULATED LENGTH INFUSION APPOINTMENT REQUEST**
  - Interval: Once
  - Occurrences: 10 Treatment Days
  - Comments:
    - EDARAVONE (RADICAVA): ensure there are 14 days between INITIAL CYCLE of 14 daily visits and SUBSEQUENT CYCLES. Patient should have a 14-day drug free period.
    - Perform every 1 day x 10

Safety Parameters and Special Instructions

- **ONC SAFETY PARAMETERS AND SPECIAL INSTRUCTIONS 4**
  - Interval: Once
  - Occurrences: 10 Treatment Days
  - Comments: EDARAVONE (RADICAVA): CONFIRM that there has been a 14-DAY DRUG FREE PERIOD between each 14-DAY TREATMENT CYCLE OF EDARAVONE.

Vitals

- **VITAL SIGNS**
  - Interval: Every 30 min
  - Occurrences: 10 Treatment Days
  - Comments: Vital signs (HR, RR, BP) prior to therapy, every 30 minutes (at the end of the first bag) x 2, and again 30 minutes after end of infusion (30 minutes after end of second bag).

CONTINUED ON PAGE 3 ➔
Nursing Orders

◉ ONC NURSING COMMUNICATION 100
  Interval: Until discontinued  Occurrences: 10 Treatment Days
  Comments: May Initiate IV Catheter Patency Adult Protocol

Medications

◉ edaravone (RADICAVA) 30 MG/100ML IVPB premix SOLN
  Dose: 60 mg  Route: Intravenous  Once over 60 Minutes for 1 dose
  Start: S  Occurrences: 10 Treatment Days
  Instructions:
  Premix. Administer as 2 consecutive 30 mg bags (60 mg total) over 60 minutes total. Do not mix edaravone with other medications. Once overwrap package is opened, use within 24 hours.
  Do not use if oxygen indicator has turned blue or purple before opening. Promptly discontinue if signs or symptoms of hypersensitivity reaction and contact provider.