Physician’s Orders

HEMATOLOGICAL HYDROXYUREA - ADULT, OUTPATIENT, INFUSION CENTER

Page 1 to 13

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: ONCOLOGY TREATMENT, NON-ONCOLOGY SUPPORTIVE CARE, Non-Onco Supportive Care 2, Non-Onco Supportive Care 3

Synonyms: HYDROXYUREA, DROxia, HYDREA, ESSENTIAL THROMBOCYTOSIS, MYELOFIBROSIS, SIKLOS, POLYCYTHEMIA VERA, PCV

Pre-Treatment Lab Cycle

<table>
<thead>
<tr>
<th>Labs</th>
<th>Cycle length: 1 day</th>
<th>Perform every 1 day x1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baseline labs</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**ONC PROVIDER REMINDER 28**
Interval: Until discontinued Occurrences: Once
Comments: This patient does not qualify for pregnancy test based on the following criteria:
* Female, aged 12 to 60 years
* Uterus is still intact

If you disagree, consider adding a pregnancy test monthly prior to chemotherapy.

Selection conditions: Patient could NOT become pregnant

Pregnancy tests recommended for Females aged 12 to 60 with Uterus intact. Please order as appropriate for clinical presentation.
Interval: Until discontinued Occurrences: Once
Selection conditions: Patient could become pregnant

**hcG, QUANTITATIVE**
Interval: Once Occurrences: Once
Selection conditions: Patient could become pregnant
Future: S, Expires: S+365, URGENT, Clinic Collect, Blood, Blood Venous

<table>
<thead>
<tr>
<th>Labs</th>
</tr>
</thead>
</table>

**COMPLETE BLOOD COUNT (CBC) W/DIFFERENTIAL**
Interval: Once Occurrences: Once
Future: S, Expires: S+365, URGENT, Clinic Collect, Blood, Blood Venous

<table>
<thead>
<tr>
<th>Labs</th>
</tr>
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</table>

**COMPREHENSIVE METABOLIC PANEL**
Interval: Once Occurrences: Once
Future: S, Expires: S+365, URGENT, Clinic Collect, Blood, Blood Venous

CONTINUED ON PAGE 2 ➔

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

<table>
<thead>
<tr>
<th>Outpatient Prescriptions</th>
<th>Cycle length: 7 days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appointment Requests</td>
<td></td>
</tr>
<tr>
<td><strong>ONBCN EDUCATION CLASS APPOINTMENT REQUEST</strong></td>
<td>Perform every 1 day x1</td>
</tr>
<tr>
<td>Interval: Once</td>
<td>Occurrences: Once</td>
</tr>
<tr>
<td>Expected: S, Expires: S+365,</td>
<td>Schedule appointment at most 3 days before or at most 3 days after</td>
</tr>
</tbody>
</table>

Safety Parameters and Special Instructions

<table>
<thead>
<tr>
<th>ONC SAFETY PARAMETERS AND SPECIAL INSTRUCTIONS 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interval: Until discontinued</td>
</tr>
<tr>
<td>Occurrences: Once</td>
</tr>
<tr>
<td>Comments: HYDROXYUREA:</td>
</tr>
<tr>
<td>Administer at the same time each day. Swallow whole; do not break, chew, or open capsules.</td>
</tr>
<tr>
<td>Check ordered labs and report abnormalities. Monitor for signs of anaphylaxis, CNS changes, infection, and bleeding, and educate patient to report.</td>
</tr>
<tr>
<td>Vasculitic ulcerations and gangrene have been reported in patients with myeloproliferative disorders during hydroxyurea treatment, most often in patients with a history of or receiving concurrent interferon therapy. Discontinue hydroxyurea (or reduce the dose) and consider alternate cytoreductive therapy if cutaneous vasculitic toxicity develops. Educate patient on sun protection and the need for checking skin closely for any changes. Instruct patient not to receive any live virus vaccinations before, during, or after treatment.</td>
</tr>
<tr>
<td>Women of reproductive potential should be advised to avoid becoming pregnant during treatment. Evaluate pregnancy status prior to use in females of reproductive potential. Females of reproductive potential should use effective contraception during and for at least 6 months after completion of therapy. Males with female partners of reproductive potential should use effective contraception during and for at least 6 months (Siklos) or 1 year (Droxia, Hydrea) after therapy. Hydroxyurea may also impair male fertility.</td>
</tr>
</tbody>
</table>

Safety Parameters and Special Instructions

<table>
<thead>
<tr>
<th>ONC NURSING COMMUNICATION 201</th>
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</thead>
<tbody>
<tr>
<td>Interval: Until discontinued</td>
</tr>
<tr>
<td>Occurrences: Once</td>
</tr>
<tr>
<td>Comments: APP may refill oral chemotherapy prescriptions, as long as patient is being evaluated at appropriate intervals?</td>
</tr>
<tr>
<td>☐ Yes</td>
</tr>
<tr>
<td>☐ No</td>
</tr>
</tbody>
</table>

Oral Chemotherapy

<table>
<thead>
<tr>
<th>hydroxyurea (HYDREA) 500 MG capsule</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dose: 500 mg Route: Oral Daily</td>
</tr>
<tr>
<td>Dispense: 28 capsules Refills: 11</td>
</tr>
<tr>
<td>Start: S Instructions: Swallow whole; do not break, chew or open capsules.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>hydroxyurea (SIKLOS) 100 MG tablet</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dose: 500 mg Route: Oral Daily</td>
</tr>
<tr>
<td>Dispense: 28 tablets Refills: 11</td>
</tr>
<tr>
<td>Start: S Instructions: Take with glass of water.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>hydroxyurea (DROXIA) 200 MG capsule</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dose: _____ mg Route: Oral Daily</td>
</tr>
<tr>
<td>Dispense: _____ capsule Refills: _____ Start: S</td>
</tr>
<tr>
<td>Instructions: Swallow whole; do not break, chew or open capsules.</td>
</tr>
</tbody>
</table>
HEMATOLOGICAL HYDROXYUREA - ADULT, OUTPATIENT, INFUSION CENTER (CONTINUED)

<table>
<thead>
<tr>
<th>Cycle 1</th>
<th>Cycle length: 28 days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Day 1</td>
<td>Perform every 1 day x1</td>
</tr>
</tbody>
</table>

Appointment Requests

**ONC BCN TELEPHONE VISIT REQUEST**
- Interval: Once
- Occurrences: 1 Treatment Cycle
- Expected: S, Expires: S+365, 30 minutes, Schedule appointment at most 3 days before or at most 3 days after

Safety Parameters and Special Instructions

**ONC SAFETY PARAMETERS AND SPECIAL INSTRUCTIONS 5**
- Interval: Until discontinued
- Occurrences: 1 Treatment Cycle
- HYDROXYUREA:
  - Administer at the same time each day. Swallow whole; do not break, chew, or open capsules.
  - Check ordered labs and report abnormalities. Monitor for signs of anaphylaxis, CNS changes, infection, and bleeding, and educate patient to report.
  - Vasculitic ulcerations and gangrene have been reported in patients with myeloproliferative disorders during hydroxyurea treatment, most often in patients with a history of or receiving concurrent interferon therapy. Discontinue hydroxyurea (or reduce the dose) and consider alternate cytoreductive therapy if cutaneous vasculitic toxicity develops.
  - Educate patient on sun protection and the need for checking skin closely for any changes. Instruct patient not to receive any live virus vaccinations before, during, or after treatment.
  - Women of reproductive potential should be advised to avoid becoming pregnant during treatment. Evaluate pregnancy status prior to use in females of reproductive potential. Females of reproductive potential should use effective contraception during and for at least 6 months after completion of therapy. Males with female partners of reproductive potential should use effective contraception during and for at least 6 months (Siklos) or 1 year (Droxia, Hydrea) after therapy. Hydroxyurea may also impair male fertility.

Safety Parameters and Special Instructions

**ONC NURSING COMMUNICATION 201**
- Interval: Until discontinued
- Occurrences: 1 Treatment Cycle
- APP may refill oral chemotherapy prescriptions, as long as patient is being evaluated at appropriate intervals?
  - Yes
  - No

Nursing Orders

**ORAL CHEMOTHERAPY COMPLIANCE**
- Interval: Until discontinued
- Occurrences: 1 Treatment Cycle

Nursing Orders

**ONC NURSING COMMUNICATION 19**
- Interval: Until discontinued
- Occurrences: 1 Treatment Cycle
- Comments: Check that labs indicated for THIS Treatment Cycle have been drawn within the last 7 days or draw them in clinic prior to beginning of treatment.

**ONC NURSING COMMUNICATION 200**
- Interval: Until discontinued
- Occurrences: 1 Treatment Cycle
- Comments: May Initiate IV Catheter Patency Adult Protocol.
### Nursing Orders

**ONC NURSING COMMUNICATION 1**

**Interval:** Until discontinued  
**Occurrences:** 1 Treatment Cycle  
**Comments:** Confirm that patient has prescription for ORAL CHEMOTHERAPY and understands how to take it. For example: time of day, in regards to food or drink, and if there are days when the patient shouldn't be taking the medication. Notify provider if patient is experiencing adverse affects from the medication or lab values are not within normal range.

### Treatment Parameters

**ONC MONITORING AND HOLD PARAMETERS 2**

**Interval:** Until discontinued  
**Occurrences:** 1 Treatment Cycle  
**Comments:** May proceed with chemotherapy if absolute neutrophil count (ANC) is greater than 1,200 per microliter.

**ONC MONITORING AND HOLD PARAMETERS 6**

**Interval:** Until discontinued  
**Occurrences:** 1 Treatment Cycle  
**Comments:** May proceed with chemotherapy if platelets greater than 100,000 per microliter.

**ONC MONITORING AND HOLD PARAMETERS 1**

**Interval:** Until discontinued  
**Occurrences:** 1 Treatment Cycle  
**Comments:** May proceed with chemotherapy if serum creatinine is less than 1.5 mg/dL.

**ONC MONITORING AND HOLD PARAMETERS 7**

**Interval:** Until discontinued  
**Occurrences:** 1 Treatment Cycle  
**Comments:** May proceed with chemotherapy if:
- Blood alanine transaminase (ALT) less than 80 IU/L (2 times upper limit of normal)
- Blood aspartate aminotransferase (AST) less than 80 IU/L (2 times upper limit of normal)

### Day 15 Appointment Requests

**ONCBCN TELEPHONE VISIT REQUEST**

**Interval:** Once  
**Occurrences:** 1 Treatment Cycle  
**Expected:** S, **Expires:** S+365, 30 minutes, Schedule appointment at most 3 days before or at most 3 days after.

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**CONTINUED ON PAGE 5**
Safety Parameters and Special Instructions

**Onc Safety Parameters and Special Instructions 5**

Interval: Until discontinued  
Occurrences: 1 Treatment Cycle  
Comments: HYDROXYUREA: 
  Administer at the same time each day. Swallow whole; do not break, chew, or open capsules.
  
  Check ordered labs and report abnormalities. Monitor for signs of anaphylaxis, CNS changes, infection, and bleeding, and educate patient to report.
  
  Vasculitic ulcerations and gangrene have been reported in patients with myeloproliferative disorders during hydroxyurea treatment, most often in patients with a history of or receiving concurrent interferon therapy. Discontinue hydroxyurea (or reduce the dose) and consider alternate cytoreductive therapy if cutaneous vasculitic toxicity develops.
  
  Educate patient on sun protection and the need for checking skin closely for any changes. Instruct patient not to receive any live virus vaccinations before, during, or after treatment.
  
  Women of reproductive potential should be advised to avoid becoming pregnant during treatment. Evaluate pregnancy status prior to use in females of reproductive potential. Females of reproductive potential should use effective contraception during and for at least 6 months after completion of therapy. Males with female partners of reproductive potential should use effective contraception during and for at least 6 months (Siklos) or 1 year (Droxia, Hydrea) after therapy. Hydroxyurea may also impair male fertility.

**Nursing Orders**

**Onc Nursing Communication 201**

Interval: Until discontinued  
Occurrences: 1 Treatment Cycle  
Comments: APP may refill oral chemotherapy prescriptions, as long as patient is being evaluated at appropriate intervals?
  
  ☐ Yes
  ☐ No

**Onc Nursing Communication 19**

Interval: Until discontinued  
Occurrences: 1 Treatment Cycle  
Comments: Check that labs indicated for THIS Treatment Cycle have been drawn within the last 7 days or draw them in clinic prior to beginning of treatment.

**Onc Nursing Communication 200**

Interval: Until discontinued  
Occurrences: 1 Treatment Cycle  
Comments: May Initiate IV Catheter Patency Adult Protocol.
### Nursing Orders

**ONC NURSING COMMUNICATION 1**

- **Interval:** Until discontinued  
- **Occurrences:** 1 Treatment Cycle  
- **Comments:** Confirm that patient has prescription for ORAL CHEMOTHERAPY and understands how to take it. For example: time of day, in regards to food or drink, and if there are days when the patient shouldn't be taking the medication. Notify provider if patient is experiencing adverse affects from the medication or lab values are not within normal range.

**Labs**

**COMPLETE BLOOD COUNT (CBC) W/DIFFERENTIAL**

- **Interval:** Once  
- **Occurrences:** 1 Treatment Cycle  
- **Expected:** S, **Expires:** S+183, URGENT, Clinic Collect, Blood, Blood Venous

**Treatment Parameters**

**ONC MONITORING AND HOLD PARAMETERS 2**

- **Interval:** Until discontinued  
- **Occurrences:** 1 Treatment Cycle  
- **Comments:** May proceed with chemotherapy if absolute neutrophil count (ANC) is greater than 1,200 per microliter

**ONC MONITORING AND HOLD PARAMETERS 6**

- **Interval:** Until discontinued  
- **Occurrences:** 1 Treatment Cycle  
- **Comments:** May proceed with chemotherapy if platelets greater than 100,000 per microliter

#### Cycle 2

**Day 1**

- **Perfor m every 1 day x1**

**Appointment Requests**

**ONCBCN TELEPHONE VISIT REQUEST**

- **Interval:** Once  
- **Occurrences:** 1 Treatment Cycle  
- **Expected:** S, **Expires:** S+365, 30 minutes, Schedule appointment at most 3 days before or at most 3 days after

**Safety Parameters and Special Instructions**

**ONC SAFETY PARAMETERS AND SPECIAL INSTRUCTIONS 5**

- **Interval:** Until discontinued  
- **Occurrences:** 1 Treatment Cycle  
- **Comments:** HYDROXYUREA:  
  - Administer at the same time each day. Swallow whole; do not break, chew, or open capsules.  
  - Check ordered labs and report abnormalities. Monitor for signs of anaphylaxis, CNS changes, infection, and bleeding, and educate patient to report.

  Vasculitic ulcerations and gangrene have been reported in patients with myeloproliferative disorders during hydroxyurea treatment, most often in patients with a history of or receiving concurrent interferon therapy. Discontinue hydroxyurea (or reduce the dose) and consider alternate cytoreductive therapy if cutaneous vasculitic toxicity develops.

  Educate patient on sun protection and the need for checking skin closely for any changes. Instruct patient not to receive any live virus vaccinations before, during, or after treatment.

  Women of reproductive potential should be advised to avoid becoming pregnant during treatment. Evaluate pregnancy status prior to use in females of reproductive potential. Females of reproductive potential should use effective contraception during and for at least 6 months after completion of therapy. Males with female partners of reproductive potential should use effective contraception during and for at least 6 months (Siklos) or 1 year (Droxia, Hydrea) after therapy. Hydroxyurea may also impair male fertility.
Safety Parameters and Special Instructions

ONC NURSING COMMUNICATION 201
Interval: Until discontinued Occurrences: 1 Treatment Cycle
Comments: APP may refill oral chemotherapy prescriptions, as long as patient is being evaluated at appropriate intervals?
☐ Yes
☐ No

Nursing Orders

ORAL CHEMOTHERAPY COMPLIANCE
Interval: Until discontinued Occurrences: 1 Treatment Cycle

ONC NURSING COMMUNICATION 19
Interval: Until discontinued Occurrences: 1 Treatment Cycle
Comments: Check that labs indicated for THIS Treatment Cycle have been drawn within the last 7 days or draw them in clinic prior to beginning of treatment.

ONC NURSING COMMUNICATION 200
Interval: Until discontinued Occurrences: 1 Treatment Cycle
Comments: May Initiate IV Catheter Patency Adult Protocol.

ONC NURSING COMMUNICATION 1
Interval: Until discontinued Occurrences: 1 Treatment Cycle
Comments: Confirm that patient has prescription for ORAL CHEMOTHERAPY and understands how to take it. For example: time of day, in regards to food or drink, and if there are days when the patient shouldn't be taking the medication. Notify provider if patient is experiencing adverse affects from the medication or lab values are not within normal range.

Labs

ONC PROVIDER REMINDER 28
Interval: Until discontinued Occurrences: 1 Treatment Cycle
Comments: This patient does not qualify for pregnancy test based on the following criteria:
* Female, aged 12 to 60 years
* Uterus is still intact

If you disagree, consider adding a pregnancy test monthly prior to chemotherapy.

Selection conditions: Patient could NOT become pregnant

Pregnancy tests recommended for Females aged 12 to 60 with Uterus intact. Please order as appropriate for clinical presentation.

HCG, QUANTITATIVE
Interval: Once Occurrences: 1 Treatment Cycle
Selection conditions: Patient could become pregnant
Expected: S, Expires: S+183, URGENT, Clinic Collect, Blood, Blood Venous
### Labs

**COMPLETE BLOOD COUNT (CBC) W/DIFFERENTIAL**

<table>
<thead>
<tr>
<th>Interval: Once</th>
<th>Occurrences: 1 Treatment Cycle</th>
</tr>
</thead>
<tbody>
<tr>
<td>Expected: S, Expires: S+183, URGENT, Clinic Collect, Blood, Blood Venous</td>
<td></td>
</tr>
</tbody>
</table>

**COMPREHENSIVE METABOLIC PANEL**

<table>
<thead>
<tr>
<th>Interval: Once</th>
<th>Occurrences: 1 Treatment Cycle</th>
</tr>
</thead>
<tbody>
<tr>
<td>Expected: S, Expires: S+183, URGENT, Clinic Collect, Blood, Blood Venous</td>
<td></td>
</tr>
</tbody>
</table>

### Treatment Parameters

**ONC MONITORING AND HOLD PARAMETERS 2**

<table>
<thead>
<tr>
<th>Interval: Until discontinued</th>
<th>Occurrences: 1 Treatment Cycle</th>
</tr>
</thead>
<tbody>
<tr>
<td>Comments: May proceed with chemotherapy if absolute neutrophil count (ANC) is greater than 1,200 per microliter</td>
<td></td>
</tr>
</tbody>
</table>

**ONC MONITORING AND HOLD PARAMETERS 6**

<table>
<thead>
<tr>
<th>Interval: Until discontinued</th>
<th>Occurrences: 1 Treatment Cycle</th>
</tr>
</thead>
<tbody>
<tr>
<td>Comments: May proceed with chemotherapy if platelets greater than 100,000 per microliter</td>
<td></td>
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</table>

**ONC MONITORING AND HOLD PARAMETERS 1**

<table>
<thead>
<tr>
<th>Interval: Until discontinued</th>
<th>Occurrences: 1 Treatment Cycle</th>
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<tbody>
<tr>
<td>Comments: May proceed with chemotherapy if serum creatinine is less than 1.5 mg/dL</td>
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**ONC MONITORING AND HOLD PARAMETERS 7**

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<thead>
<tr>
<th>Interval: Until discontinued</th>
<th>Occurrences: 1 Treatment Cycle</th>
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<tbody>
<tr>
<td>Comments: May proceed with chemotherapy if:</td>
<td></td>
</tr>
<tr>
<td>- Blood alanine transaminase (ALT) less than 80 IU/L (2 times upper limit of normal)</td>
<td></td>
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</table>

### Day 15 Appointment Requests

**ONCBCN TELEPHONE VISIT REQUEST**

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<thead>
<tr>
<th>Interval: Once</th>
<th>Occurrences: 1 Treatment Cycle</th>
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<tbody>
<tr>
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</table>

Perform every 1 day x1
### Safety Parameters and Special Instructions

<table>
<thead>
<tr>
<th>ONC SAFETY PARAMETERS AND SPECIAL INSTRUCTIONS 5</th>
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<tbody>
<tr>
<td><strong>Interval:</strong> Until discontinued</td>
</tr>
<tr>
<td><strong>Occurrences:</strong> 1 Treatment Cycle</td>
</tr>
<tr>
<td><strong>Comments:</strong> HYDROXYUREA:</td>
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<tr>
<td>Administer at the same time each day. Swallow whole; do not break, chew, or open capsules.</td>
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<td>Check ordered labs and report abnormalities. Monitor for signs of anaphylaxis, CNS changes, infection, and bleeding, and educate patient to report.</td>
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<td>Vasculitic ulcerations and gangrene have been reported in patients with myeloproliferative disorders during hydroxyurea treatment, most often in patients with a history of or receiving concurrent interferon therapy. Discontinue hydroxyurea (or reduce the dose) and consider alternate cytoreductive therapy if cutaneous vasculitic toxicity develops.</td>
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<td>Educate patient on sun protection and the need for checking skin closely for any changes. Instruct patient not to receive any live virus vaccinations before, during, or after treatment.</td>
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<th>ONC NURSING COMMUNICATION 201</th>
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<td><strong>Interval:</strong> Until discontinued</td>
</tr>
<tr>
<td><strong>Occurrences:</strong> 1 Treatment Cycle</td>
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<tr>
<td><strong>Comments:</strong> APP may refill oral chemotherapy prescriptions, as long as patient is being evaluated at appropriate intervals?</td>
</tr>
<tr>
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<tr>
<td>☐ No</td>
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### Nursing Orders

<table>
<thead>
<tr>
<th>ORAL CHEMOTHERAPY COMPLIANCE</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Interval:</strong> Until discontinued</td>
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<th>ONC NURSING COMMUNICATION 19</th>
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<td><strong>Interval:</strong> Until discontinued</td>
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<tr>
<td><strong>Occurrences:</strong> 1 Treatment Cycle</td>
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<td><strong>Comments:</strong> Check that labs indicated for THIS Treatment Cycle have been drawn within the last 7 days or draw them in clinic prior to beginning of treatment.</td>
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<thead>
<tr>
<th>ONC NURSING COMMUNICATION 200</th>
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<tr>
<td><strong>Interval:</strong> Until discontinued</td>
</tr>
<tr>
<td><strong>Occurrences:</strong> 1 Treatment Cycle</td>
</tr>
<tr>
<td><strong>Comments:</strong> May Initiate IV Catheter Patency Adult Protocol.</td>
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<table>
<thead>
<tr>
<th>ONC NURSING COMMUNICATION 1</th>
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</tr>
<tr>
<td>Labs</td>
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<tr>
<td>------</td>
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</tbody>
</table>
| 1. **COMPLETE BLOOD COUNT (CBC) W/DIFFERENTIAL**  
   **Interval**: Once  
   **Occurrences**: 1 Treatment Cycle  
   **Expected**: S, Expires: S+183, URGENT, Clinic Collect, Blood, Blood Venous |

<table>
<thead>
<tr>
<th>Nursing Orders</th>
</tr>
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</table>
| 1. **ORAL CHEMOTHERAPY COMPLIANCE**  
   **Interval**: Until discontinued  
   **Occurrences**: 1 Treatment Cycle |

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| 1. **ONC NURSING COMMUNICATION 19**  
   **Interval**: Until discontinued  
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| 1. **ONC NURSING COMMUNICATION 200**  
   **Interval**: Until discontinued  
   **Occurrences**: 1 Treatment Cycle  
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<table>
<thead>
<tr>
<th>Treatment Parameters</th>
</tr>
</thead>
</table>
| 1. **ONC MONITORING AND HOLD PARAMETERS 2**  
   **Interval**: Until discontinued  
   **Occurrences**: 1 Treatment Cycle  
   **Comments**: May proceed with chemotherapy if absolute neutrophil count (ANC) is greater than 1,200 per microliter |

<table>
<thead>
<tr>
<th>Treatment Parameters</th>
</tr>
</thead>
</table>
| 1. **ONC MONITORING AND HOLD PARAMETERS 6**  
   **Interval**: Until discontinued  
   **Occurrences**: 1 Treatment Cycle  
   **Comments**: May proceed with chemotherapy if platelets greater than 100,000 per microliter |

<table>
<thead>
<tr>
<th>Cycles 3 to 5</th>
</tr>
</thead>
</table>
| **Repeat 3 times**  
   **Cycle length**: 28 days  
   **Day 1**  
   **Perform every 1 day x1** |

<table>
<thead>
<tr>
<th>Appointment Requests</th>
</tr>
</thead>
</table>
| 1. **ONC CBCN TELEPHONE VISIT REQUEST**  
   **Interval**: Once  
   **Occurrences**: 3 Treatment Cycles  
   **Expected**: S, Expires: S+365, 30 minutes, Schedule appointment at most 3 days before or at most 3 days after |
Safety Parameters and Special Instructions

### ONC SAFETY PARAMETERS AND SPECIAL INSTRUCTIONS 5

**Interval:** Until discontinued  
**Occurrences:** 3 Treatment Cycles  
**Comments:**  

**HYDROXYUREA:**  
Administer at the same time each day. Swallow whole; do not break, chew, or open capsules.  
Check ordered labs and report abnormalities. Monitor for signs of anaphylaxis, CNS changes, infection, and bleeding, and educate patient to report.  
Vasculitic ulcers and gangrene have been reported in patients with myeloproliferative disorders during hydroxyurea treatment, most often in patients with a history of or receiving concurrent interferon therapy. Discontinue hydroxyurea (or reduce the dose) and consider alternate cytoreductive therapy if cutaneous vasculitic toxicity develops.  
Educate patient on sun protection and the need for checking skin closely for any changes. Instruct patient not to receive any live virus vaccinations before, during, or after treatment.  
Women of reproductive potential should be advised to avoid becoming pregnant during treatment. Evaluate pregnancy status prior to use in females of reproductive potential. Females of reproductive potential should use effective contraception during and for at least 6 months after completion of therapy. Males with female partners of reproductive potential should use effective contraception during and for at least 6 months (Siklos) or 1 year (Droxia, Hydrea) after therapy. Hydroxyurea may also impair male fertility.

### ONC NURSING COMMUNICATION 201

**Interval:** Until discontinued  
**Occurrences:** 3 Treatment Cycles  
**Comments:**  

APP may refill oral chemotherapy prescriptions, as long as patient is being evaluated at appropriate intervals?  
☐ Yes  
☐ No

### NURSING ORDERS

#### ORAL CHEMOTHERAPY COMPLIANCE

**Interval:** Until discontinued  
**Occurrences:** 3 Treatment Cycles  
**Comments:**  
Check that labs indicated for THIS Treatment Cycle have been drawn within the last 7 days or draw them in clinic prior to beginning of treatment.

#### ONC NURSING COMMUNICATION 19

**Interval:** Until discontinued  
**Occurrences:** 3 Treatment Cycles  
**Comments:**  
May Initiate IV Catheter Patency Adult Protocol.

#### ONC NURSING COMMUNICATION 200

**Interval:** Until discontinued  
**Occurrences:** 3 Treatment Cycles  
**Comments:**  
May Initiate IV Catheter Patency Adult Protocol.
### Nursing Orders

**ONC NURSING COMMUNICATION 1**

- Interval: Until discontinued  
- Occurrences: 3 Treatment Cycles  
- Comments: Confirm that patient has prescription for ORAL CHEMOTHERAPY and understands how to take it. For example: time of day, in regards to food or drink, and if there are days when the patient shouldn’t be taking the medication. Notify provider if patient is experiencing adverse affects from the medication or lab values are not within normal range.

### Labs

**ONC PROVIDER REMINDER 28**

- Interval: Until discontinued  
- Occurrences: 3 Treatment Cycles --  
- Comments: This patient does not qualify for pregnancy test based on the following criteria:  
  * Female, aged 12 to 60 years  
  * Uterus is still intact  

  If you disagree, consider adding a pregnancy test monthly prior to chemotherapy.

  Selection conditions: Patient could NOT become pregnant

  **Pregnancy tests recommended for Females aged 12 to 60 with Uterus intact. Please order as appropriate for clinical presentation.**

**HCG, QUANTITATIVE**

- Interval: Once  
- Occurrences: 3 Treatment Cycles  
- Selection conditions: Patient could become pregnant

Expected: S, Expires: S+183, URGENT, Clinic Collect, Blood, Blood Venous

### Labs

**COMPLETE BLOOD COUNT (CBC) W/DIFFERENTIAL**

- Interval: Once  
- Occurrences: 1 Treatment Cycle  
- Expected: S, Expires: S+183, URGENT, Clinic Collect, Blood, Blood Venous

### Labs

**COMPREHENSIVE METABOLIC PANEL**

- Interval: Once  
- Occurrences: 1 Treatment Cycle  
- Expected: S, Expires: S+183, URGENT, Clinic Collect, Blood, Blood Venous

### Treatment Parameters

**ONC MONITORING AND HOLD PARAMETERS 2**

- Interval: Until discontinued  
- Occurrences: 3 Treatment Cycles  
- Comments: May proceed with chemotherapy if absolute neutrophil count (ANC) is greater than 1,200 per microliter

### Treatment Parameters

**ONC MONITORING AND HOLD PARAMETERS 6**

- Interval: Until discontinued  
- Occurrences: 3 Treatment Cycles  
- Comments: May proceed with chemotherapy if platelets greater than 100,000 per microliter

### Treatment Parameters

**ONC MONITORING AND HOLD PARAMETERS 1**

- Interval: Until discontinued  
- Occurrences: 3 Treatment Cycles  
- Comments: May proceed with chemotherapy if serum creatinine is less than 1.5 mg/dL
Treatment Parameters

**ONC MONITORING AND HOLD PARAMETERS 7**

Interval: Until discontinued  
Occurrences: 3 Treatment Cycles  
Comments: May proceed with chemotherapy if:

- Blood alanine transaminase (ALT) less than 80 IU/L (2 times upper limit of normal)
- Blood aspartate aminotransferase (AST) less than 80 IU/L (2 times upper limit of normal)

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