

Ceftriaxone IV Desensitization Protocol [3785]

Patient must be in ICU setting with continuous monitoring.

Notify Physician

Notify Physician

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| [X] Notify physician if patient needs treatment with any PRN medication due to a reaction to the desensitization protocol. | Routine, Until discontinued, Starting S, Notify physician if patient needs treatment with any PRN medication for a reaction to the desensitization protocol. |
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Nursing

Monitoring Parameters:

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|---|---|
| [X] Vital signs - T/P/R/BP | Routine, As needed
Vitals prior to each dose of desensitization protocol |
| [X] Maintain IV access | Routine, Until discontinued, Starting S
Maintain IV access at all time, Start Normal Saline (0.9%) at a rate of 20 mL/hr if previous access has not been established |
| [X] Have code blue cart readily available prior to starting desensitization orders. | Routine, Once For 1 Occurrences
Have code blue cart readily available prior to starting desensitization orders. |

IV Fluids

Start Normal Saline (0.9%) at 20 mL/hr if previous IV access has not been established

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| [] sodium chloride 0.9 % infusion | intravenous, at 20 mL/hr, continuous
Maintain IV access at all times. |
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Medications

Ceftriaxone IV Desensitization Protocol

- | [X] Ceftriaxone IV Desensitization Orders | "Followed by" Linked Panel |
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| [X] ceftriaxone (0.2 mg/mL) IV piggyback - desensitization bag 1 | 0.1 mg, intravenous, at 2 mL/hr, for 15 Minutes, once, Starting H+60 Minutes, For 1 Doses
Dose #1: Begin Bag 1 infusion (Dose = 0.1 mg (VTBI = 0.5 mL)) at 2mL/hr for 15 minutes, then increase rate to 5mL/hr on the next order using this same bag 1.
Reason for Therapy: |
| [X] ceftriaxone (0.2 mg/mL) IV piggyback - desensitization bag 1 | 0.25 mg, intravenous, at 5 mL/hr, for 15 Minutes, once, Starting H+75 Minutes, For 1 Doses
Dose #2: Continue Bag 1 infusion (Dose = 0.25 mg (VTBI = 1.25 mL)) at 5mL/hr for 15 minutes, then increase rate to 10mL/hr on the next order using this same bag 1.
Reason for Therapy: |
| [X] ceftriaxone (0.2 mg/mL) IV piggyback - desensitization bag 1 | 0.5 mg, intravenous, at 10 mL/hr, for 15 Minutes, once, Starting H+90 Minutes, For 1 Doses
Dose #3: Continue Bag 1 infusion (Dose = 0.5 mg (VTBI = 2.5 mL)) at 10mL/hr for 15 minutes, then increase rate to 20mL/hr on the next order using this same bag 1.
Reason for Therapy: |
| [X] ceftriaxone (0.2 mg/mL) IV piggyback - desensitization bag 1 | 1 mg, intravenous, at 20 mL/hr, for 15 Minutes, once, Starting H+105 Minutes, For 1 Doses
Dose #4: Continue Bag 1 infusion (Dose = 1 mg (VTBI = 5 mL)) at 20mL/hr for 15 minutes, then STOP this infusion. Start next infusion using bag 2.
Reason for Therapy: |

[X] ceftriaxone (2 mg/mL) IV piggyback - desensitization bag 2	2.5 mg, intravenous, at 5 mL/hr, for 15 Minutes, once, Starting H+120 Minutes, For 1 Doses Dose #5: Begin Bag 2 infusion (Dose = 2.5 mg (VTBI = 1.25 mL)) at 5mL/hr for 15 minutes, then increase rate to 10mL/hr on the next order using this same bag 2. Reason for Therapy:
[X] ceftriaxone (2 mg/mL) IV piggyback - desensitization bag 2	5 mg, intravenous, at 10 mL/hr, for 15 Minutes, once, Starting H+135 Minutes, For 1 Doses Dose #6: Continue Bag 2 infusion (Dose = 5 mg (VTBI = 2.5 mL)) at 10mL/hr for 15 minutes, then increase rate to 20mL/hr on the next order using this same bag 2. Reason for Therapy:
[X] ceftriaxone (2 mg/mL) IV piggyback - desensitization bag 2	10 mg, intravenous, at 20 mL/hr, for 15 Minutes, once, Starting H+150 Minutes, For 1 Doses Dose #7: Continue Bag 2 infusion (Dose = 10 mg (VTBI = 5 mL)) at 20mL/hr for 15 minutes, then increase rate to 40mL/hr on the next order using this same bag 2. Reason for Therapy:
[X] ceftriaxone (2 mg/mL) IV piggyback - desensitization bag 2	20 mg, intravenous, at 40 mL/hr, for 15 Minutes, once, Starting H+165 Minutes, For 1 Doses Dose #8: Continue Bag 2 infusion (Dose = 20 mg (VTBI = 10 mL)) at 40mL/hr for 15 minutes, then STOP this infusion. Start next infusion using bag 3. Reason for Therapy:
[X] ceftriaxone (19.213 mg/mL) IV piggyback - desensitization bag 3	48 mg, intravenous, at 10 mL/hr, for 15 Minutes, once, Starting H+180 Minutes, For 1 Doses Dose #9: Begin Bag 3 infusion (Dose = 48 mg (VTBI = 2.5 mL)) at 10mL/hr for 15 minutes, then increase rate to 20mL/hr on the next order using this same bag 3. Reason for Therapy:
[X] ceftriaxone (19.213 mg/mL) IV piggyback - desensitization bag 3	96 mg, intravenous, at 20 mL/hr, for 15 Minutes, once, Starting H+195 Minutes, For 1 Doses Dose #10: Continue Bag 3 infusion (Dose = 96 mg (VTBI = 5 mL)) at 20mL/hr for 15 minutes, then increase rate to 40mL/hr on the next order using this same bag 3. Reason for Therapy:
[X] ceftriaxone (19.213 mg/mL) IV piggyback - desensitization bag 3	192 mg, intravenous, at 40 mL/hr, for 15 Minutes, once, Starting H+210 Minutes, For 1 Doses Dose #11: Continue Bag 3 infusion (Dose = 192 mg (VTBI = 10 mL)) at 40mL/hr for 15 minutes, then increase rate to 80mL/hr on the next order using this same bag 3. Reason for Therapy:
[X] ceftriaxone (19.213 mg/mL) IV piggyback - desensitization bag 3	624 mg, intravenous, at 80 mL/hr, for 24.5 Minutes, once, Starting H+225 Minutes, For 1 Doses Dose #12: Continue Bag 3 infusion (Dose = 624 mg (VTBI = 32.5 mL)) at 80mL/hr for 24.5 minutes, then STOP this infusion. Reason for Therapy:

If patient develops a mild reaction such as itching, flushing, hives, self-limiting rash, or nausea with normal vital signs while undergoing desensitization, stop the medication and give:

[X] diphenhydrAMINE (BENADRYL) injection	25 mg, intravenous, once PRN, mild desensitization reaction Notify provider if this medication is used to manage a reaction to the desensitization protocol.
[X] hydrOXYzine (ATARAX) tablet	25 mg, oral, once PRN, itching, mild desensitization reaction Notify provider if this medication is used to manage a reaction to the desensitization protocol.
[X] fexofenadine (ALLEGRA) tablet	60 mg, oral, once PRN, allergies, mild desensitization reaction Notify provider if this medication is used to manage a reaction to the desensitization protocol.
[X] Famotidine (PEPCID) IV/PO	"Or" Linked Panel

[X] famotidine (PEPCID) tablet	20 mg, oral, once PRN, heartburn, mild desensitization reaction Notify provider if this medication is used to manage a reaction to the desensitization protocol. May crush and give per nasogastric tube if needed. Give the tablet if the patient can tolerate oral medication.
[X] famotidine (PEPCID) injection	20 mg, intravenous, once PRN, mild desensitization reaction Notify provider if this medication is used to manage a reaction to the desensitization protocol. Use injection if patient cannot tolerate oral medication or requires a faster onset of action. Per Med Staff Policy, R.Ph. will automatically switch IV to equivalent PO dose when above approved criteria are satisfied:

If patient develops a moderate reaction such as mild dyspnea or angioedema with normal vital signs, while undergoing desensitization stop the medication and give:

[X] diphenhydrAMINE (BENADRYL) injection	50 mg, intravenous, once PRN, moderate desensitization reaction Notify provider if this medication is used to manage a reaction to the desensitization protocol.
[X] methylPREDNISolone sodium succinate (Solu-MEDROL) injection	40 mg, intravenous, once PRN, moderate desensitization reaction Notify provider if this medication is used to manage a reaction to the desensitization protocol.

If patient develops a severe reaction such as hypotension, throat swelling, wheezing/respiratory distress, or decreased oxygen saturation with normal vital signs while undergoing desensitization, stop the medication and treat immediately with:

[X] epINEPHrine (ADRENALIN) 1 mg/1 mL injection	0.3 mg, intramuscular, once PRN, anaphylaxis, severe desensitization reaction Notify provider if this medication is used to manage a reaction to the desensitization protocol.
[X] famotidine (PEPCID) injection	20 mg, intravenous, once PRN, severe desensitization reaction Notify provider if this medication is used to manage a reaction to the desensitization protocol. Per Med Staff Policy, R.Ph. will automatically switch IV to equivalent PO dose when above approved criteria are satisfied:
[X] Supplemental Oxygen for severe reaction	STAT, Once For 1 Occurrences Give supplementary oxygen by facial mask and place the patient in a recumbent position for severe reaction. Notify provider if oxygen was used to manage a reaction to the desensitization protocol.
[X] methylPREDNISolone sodium succinate (Solu-MEDROL) injection	60 mg, intravenous, once PRN, severe desensitization reaction Notify provider if this medication is used to manage a reaction to the desensitization protocol.
[X] albuterol (PROVENTIL) nebulizer solution	5 mg, nebulization, every 30 min PRN, wheezing, severe desensitization reaction Notify provider if this medication is used to manage a reaction to the desensitization protocol. Aerosol Delivery Device: Hand-Held Nebulizer

Labs

Respiratory

Additional Orders