

# Antithymocyte (THYMOGLOBULIN) Order Set [2544]

## Nursing

### Nursing

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|--|---|
| <input checked="" type="checkbox"/> Check for central line or peripherally-inserted central line | Routine, Once For 1 Occurrences   |
| <input type="checkbox"/> Notify Physician for vitals:  | Routine, Until discontinued, Starting S<br>Temperature greater than:<br>Temperature less than:<br>Systolic BP greater than:<br>Systolic BP less than: 90<br>Diastolic BP greater than:<br>Diastolic BP less than: 60<br>MAP less than:<br>Heart rate greater than (BPM): 110<br>Heart rate less than (BPM):<br>Respiratory rate greater than:<br>Respiratory rate less than:<br>SpO2 less than: |
| <input type="checkbox"/> Notify Physician if no central access                                   | Routine, Once For 1 Occurrences   |
| <input type="checkbox"/> Notify Physician for severe chills                                      | Routine, Until discontinued, Starting S   |

## Medications

### Premedications

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| <input checked="" type="checkbox"/> acetaminophen (TYLENOL) tablet                                   | 650 mg, oral, once, For 1 Doses<br>Give 30 minutes PRIOR to Antithymocyte Globulin infusion.       |
| <input checked="" type="checkbox"/> Premedication: diphenhydramine (BENADRYL) tablet<br>OR injection | <b>"Or" Linked Panel</b>   |
| <input checked="" type="checkbox"/> diphenhydrAMINE (BENADRYL) tablet                                | 25 mg, oral, once, For 1 Doses<br>Give 30 minutes PRIOR to Antithymocyte Globulin infusion.        |
| <input checked="" type="checkbox"/> diphenhydrAMINE (BENADRYL) injection                             | 25 mg, intravenous, once, For 1 Doses<br>Give 30 minutes PRIOR to Antithymocyte Globulin infusion. |
| <input checked="" type="checkbox"/> Premedications: Steroids (Single Response)                       |  |
| <input type="checkbox"/> methylPREDNISolone sodium succinate<br>(Solu-MEDROL) injection              | intravenous, once, For 1 Doses<br>Give 30 minutes PRIOR to Antithymocyte Globulin infusion.        |
| <input type="checkbox"/> hydrocortisone sodium succinate<br>(Solu-CORTEF) injection                  | intravenous, once, For 1 Doses<br>Give 30 minutes PRIOR to Antithymocyte Globulin infusion.        |

### Antithymocute Globulin

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| <input checked="" type="checkbox"/> antithymocyte globulin (rabbit) (THYMOGLOBULIN) 1.5 mg/kg in sodium chloride 0.9 % 250 mL IVPB | 1.5 mg/kg, intravenous, for 6 Hours, once, Starting H+30 Minutes, For 1 Doses |
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### Infusion Reaction Management

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| <input checked="" type="checkbox"/> hydrocortisone sodium succinate (Solu-CORTEF) injection | 100 mg, intravenous, once PRN, chills                                      |
| <input checked="" type="checkbox"/> acetaminophen (TYLENOL) tablet                          | 325 mg, oral, every 6 hours PRN, fever, for Temperature GREATER than 100 F |

## Labs

### Laboratory in AM

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|---|---------------------------|
| <input type="checkbox"/> CBC with platelet and differential | AM draw For 1 Occurrences |
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