

## **Riverbend Medical Center Regional Infusion Center (RIC)** 3377 Riverbend Drive Suite 502/510 Springfield, Oregon 97477 Phone 541-222-6280 Fax 541-349-8006

## Benralizumab (FASENRA) INFUSION (v. 05/16/2024)

	ations:	
	Benralizumab 30 mg subcutaneous injection every 28 days x 3 doses the	hen benralizumab 30 mg subcutaneous injection every 56 days
Nursing	g communications:	
	Vital signs: Initial and prn	
	Monitor patient for 30 minutes post $1^{\mbox{\scriptsize st}}$ injection for hyper/ hypotension, dy	spnea, nausea, itching, hives, rash, and wheezing
	Counsel patients regarding signs and symptoms of anaphylaxis with instruct	tion to seek immediate medical care if symptoms occur
Emerge	ency Medications: (Emergency medications can be given IM if IV route un	navailable)
	DiphenhydrAMINE (BENADRYL) 25 to 50 mg IV as needed for mild to m noresis, fever, palpitations, chest discomfort, blood pressure changes (>/= 2 I once, if reaction does not resolve in 3 minutes may repeat 25 mg IV dose	20 points in SBP), nausea, urticaria, chills, pruritic). Administer
20 poi	MethylPREDNISolone sodium succinate (Solu-MEDROL) 125 mg IV once to moderate drug reaction (flushing, dizziness, headaches, diaphoresis, fevoints in SBP), nausea, urticaria, chills, pruritic) that worsen or persist 5 minuact provider if given.	er, palpitations, chest discomfort, blood pressure changes (>/=
Avoid	Epinephrine 0.3 mg IM once for anaphylaxis. If reaction does not resolved use of hand, foot, leg veins in elderly patient and those with occlusive vas Famotidine (PEPCID) 20 mg IV once as needed for infusion/allergic reactions.	scular disease. Contact provider if given.
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