

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

TBO-FILGRASTIM (Granix) Injection (v. 05/16/2024)

Diagnosis/Indication (ICD-10): Patient Weight		
1 auent weight		
Medication:		
TBO-filgrastim 5 mcg/kg subcutaneous daily (Doses greater than or equal to 390 mcg should round up to 480		hould round down to 300 mcg. Doses calculated t
Nursing communications:		
Vital signs: as needed		
Emergency Medications:		
DiphenhydrAMINE (BENADRYL) 25 to 50 mg IV as n diaphoresis, fever, palpitations, chest discomfort, blood pro		
 Administer 25 mg IV once, if reaction does not resol provider. 	ve in 3 minutes may repeat 25 m	g IV dose for a total of 50 mg and contact
MethylPREDNISolone sodium succinate (Solu-MED symptoms of mild to moderate drug reaction (flushing, dizz blood pressure changes (>/= 20 points in SBP), nausea, urti administration of diphenhydramine (Benadryl). Contact pr	ziness, headaches, diaphoresis, fev icaria, chills, pruritic) that worsen o	ver, palpitations, chest discomfort,
Epinephrine 0.3 mg IM once for anaphylaxis. If total of 0.6 mg. Avoid use of hand, foot, leg veins in elderly if given.		
■ Famotidine (PEPCID) 20 mg IV once as needed for in	fusion/ allergic reaction	
■ Emergency medications can be given IM if IV route t	unavailable	
ient name:	Provider printed na	nme:
DB:	Provider signature:	·
ight Weight	Date:	Time: