

Height _____ Weight _____

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Therapeutic Phlebotomy Order Set (v. 05/24/2024)

Diagili	Diagnosis/Indication (ICD-10):	
Medicati	dications: Sodium chloride 0.9% bolus 250 mLIV over 15 minutes after phlebotomy	
	Sodium chloride 0.9% bolus 500 mLIV over 30 minutes after phlebotomy	
	If patient symptomatic post phlebotomy, sodium chloride 0.9% bolus 500 mL IV over 30 minutes pm lightheaded or dizzy	
Numerimore	rsing communications:	
n using o	77. 14. 1.0. 0. 1. 1.1.4. 1	
n	n Therapeutic phlebotomy: Volume remove Frequency:	
	Serial patient: hold phlebotomy until next scheduled appointment for hemoglobin less than	
	Serial patient: phlebotomize for hemoglobin over	
Access:	seze:	
••	Insert peripheral IV - Every visit, remove after IV administration complete	
	 Access & Use Central Line / CVAD Initiate Central Line (Non-PICC) Maintenance Protocol Heparin, porcine (PF) 100 unit/mL flush 5 mL as needed for Port-a-Cath line care Alteplase (Cathflo) 2 mg as needed for occluded catheter. For clearing central line catheter- retain in cathet to 2 hours, instill a 2nd dose if occluded 	er for 30 minutes
	Access & Use PICC Initiate PICC Maintenance Protocol Normal saline flush 3 mL as needed for PICC/ Hickman line care Alteplase (Cathflo) 2 mg as needed for occluded catheter. For clearing central line catheter- retain in cathet hours, instill a 2nd dose if occluded	er for 30 minutes to 2
Emergen	ergency Medications:	
	DiphenhydrAMINE (BENADRYI) 25 to 50 mg IV as needed for mild to moderate drug reactions (flushing, dizzines diaphoresis, fever, palpitations, chest discomfort, blood pressure changes (>/= 20 points in SBP), nausea, urticaria, chills, mg IV once, if reaction does not resolve in 3 minutes may repeat 25 mg IV dose for a total of 50 mg and contact provider.	
•	_	avad symptoms of
20 pc	MethylPREDNISolone sodium succinate (Solu-MEDROI) 125 mg IV once as needed for shortness of breath, conti mild to moderate drug reaction (flushing, dizziness, headaches, diaphoresis, fever, palpitations, chest discomfort, blood properties in SBP), nausea, urticaria, chills, pruritic) that worsen or persist 5 minutes after administration of diphenhydran Contact provider if given.	oressure changes (>/=
-	Epinephrine 0.3 mg IM once for anaphylaxis. If reaction does not resolve in 3 minutes may repeat 0.3 mg IM dos	e for a total of 0.6 mg.
Avoid	Avoid use of hand, foot, leg veins in elderly patient and those with occlusive vascular disease. Contact provider it given. Famotidine (PEPCID) 20 mg IV once as needed for infusion/allergic reaction.	
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Patient na	ent name: Provider printed name:	
DOB:	Provider signature:	

Date: _____ Time: ____