

METHOTREXATE INFUSION:

Patient Diagnosis:_____

Contact Physician:_____ Consent

Weight:_____ Height:_____ BSA:_____ Cycle:_____

Adjusted IBW:_____ Adjusted BSA:_____

Allergies:_____

1. LABS:

2. HYDRATION: Start IV hydration Sodium Chloride 0.45% with sodium bicarbonate 50 mEq/liter at 150 ml/hour 6 hours prior to administration of methotrexate. Continue hydration throughout methotrexate administration and post methotrexate until methotrexate level is undetectable.

3. PRE-MEDICATIONS: (check the appropriate medications)

- Ondansetron: 16 mg PO twice daily for 2 doses. First dose prior to methotrexate infusion. May give IV if unable to tolerate oral medications.
- Dexamethasone 10mg PO prior to methotrexate infusion
- Lorazepam 0.5mg – 1.0mg PO or IV every 4 hours prn nausea
- Prochlorperazine 10mg PO every 6 hours as needed nausea

4. OTHER MEDICATIONS: (check the appropriate medications)

- Acyclovir: 400 mg PO BID
- TMP/Sulfa: Hold during methotrexate infusion, may be resume once methotrexate level is undetectable. 160/800mg 1 tablet PO BID every Sat/Sun
- Antifungal:
- Other:

5. CHEMOTHERAPY:

- a. **Methotrexate** (200 mg/m²)=_____mg in Dextrose 5% in Water 250mL IV over **two hours** then (800mg/m²)= _____mg in Dextrose 5% in Water 1000mL IV over **22 hours**.
- b. **Leucovorin** 50mg IV beginning 12 hours after the completion of methotrexate then 15mg IV every 6 hours until the serum methotrexate level is <0.05mcg/ml
- c. Check urine pH every 8 hours. If pH less than 7.0, give sodium bicarbonate 50 mEq IV.

6. LABS:

Methotrexate levels every AM starting approximately 48 hours after the initiation of methotrexate and until serum methotrexate level is <0.05mcg/ml. Start daily methotrexate levels on _____.

7. FOLLOW-UP:

Signed:_____ Pager:_____

Reference: Blood 104(6) 2004; 1624-1630
Heme/medicine/lymphoma