

Rabbit antithymocyte globulin (r-ATG) for Aplastic Anemia

Contact Physician: _____ **Pager:** _____

Diagnosis: _____

Cycle: _____

Weight: _____ **Height:** _____ **BSA:** _____

Adjusted IBW: _____ **Adjusted BSA:** _____

Allergies: _____

1. Hydration: Start IV hydration ____ hours prior to r-ATG with _____ at _____ ml/hour.

2. Pre-Medications: (check the appropriate medications)

- Dolasetron:
- Lorazepam: 0.5mg - 1 mg PO or IV every 4 hours prn nausea
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3. Other Medications: (check the appropriate medications)

- Allopurinol: 300mg PO QD for _____ days
- Acyclovir: 400mg PO bid
- TMP/Sulfa: 80/400mg 2 tablets PO bid every Sat/Sun
- Antifungal:
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4. Immunosuppressive Regimen:

- **Diphenhydramine** 50 mg IV 30 minutes before r-ATG and then 25 mg PO every 6 hours until 12 hours after last dose of r-ATG.
- **Acetaminophen** 650 mg PO 30 minutes before r-ATG and then 650 mg PO every 6 hours until 12 hours after the last dose of r-ATG.
- **Dexamethasone** (0.2 mg/kg) _____ mg IV over 30 minutes to be given 1 hour prior to beginning r-ATG, then **prednisone** (0.5 mg/kg) _____ PO every 12 hours days 1-5.
- **Rabbit antithymocyte globulin** (3.5 mg/kg/day) _____ mg IV infusion over 8 hours, days 1-5.
- **Cyclosporine - Neoral** (5mg/kg/day = _____ mg) given in 2 divided doses = _____ mg PO every 12 hours beginning day 1 of r-ATG.
- **Prednisone** (1mg/kg/day = _____ mg) given in 2 divided doses = _____ mg PO every 12 hours days 6-10, then taper dose over 14 days beginning day 11.

For r-ATG reaction: If wheezing or urticaria occurs, give dexamethasone 200 mg IV, diphenhydramine 50 mg IV. **For anaphylaxis,** epinephrine 0.3 mg IM/SC (1:1,000 dilution).

Labs:

Cyclosporine trough levels every AM daily starting day 3. Adjust cyclosporine dose to achieve therapeutic level of 200 - 400 mg/ml.

Signed: _____

Pager: _____

Reference: BJ Haematology, 107, 330-334, 1999.

Updated:

Expires: