

PHYSICIAN'S ORDER SHEET

BMT Autologous Donor Revised 6/23/14	Post-Chemo Mobilization	Regimen	
	For		
Admit PSCI/DrDiagnosis		-	
Actual weightk Ideal weightk	g Heightcm g Actual BSA	n m²	
be home bound due Fax results STAT to week from 08:00-10 8521 and asking the	to neutropenia post-chemo o Hershey Medical Center, 6:00. On the weekends/hol	BMT office, Attn:, at ext 165 lidays please also call results to our transplant Fellow by 6e/Onc Fellow on call. Please fax results on	56 during calling ext
	s/dialysis care beginning or hen not being used daily an	n Policies attached, please follow. nd dressing change weekly.	Flush line
• Lumen priming v	volume is for blue	lumen	
• Lumen priming v	volume is for red lu	umen	
	ume is 1.7; draw up 1 ml of 1.7 in a syringe	f heparin (5000 u/ml) and 0.7 ml of sodium chloride for a	ı total
Flushing concentration nee Heparin 50 0.9% Sodi	000 units/ml		
☐ Filgrastim 5 mcg subo	cutaneous injections starti	ing on as daily injections until stem cel	ll collection
☐ Pegfilgrastim 6mg sul	ocutaneous on		
Lumen used for daily bloo	d draws may be used as Hio	ckman and flushed with 100 units/ml of Heparin after blo	ood draw.
Prepared by	Date		
Ordered by	Date	Noted/Time/Initial	

