


<b>Name of Policy:</b> <u>Ordering of Antineoplastic Agents</u> <b>Policy Number:</b> 3364-100-70-07 <b>Department:</b> Hospital Administration <b>Approving Officer:</b> Chief Executive Officer, UTMCC  <b>Responsible Agent:</b> Chief of Staff  <b>Scope:</b> The University of Toledo Medical Center and its Medical Staff	  <b>Effective Date:</b> 11/15/2022 <b>Initial Effective Date:</b> November 13, 1996
<input type="checkbox"/> New policy proposal <input checked="" type="checkbox"/> Minor/technical revision of existing policy <input type="checkbox"/> Major revision of existing policy <input type="checkbox"/> Reaffirmation of existing policy	

**(A) Policy Statement**

All anti-neoplastic orders used to treat cancer must be written for and signed by an appropriate attending physician or hematology/oncology fellow.

**(B) Purpose of Policy**

To provide guidelines for prescribing chemotherapy and biotherapy used to treat cancer and non-cancerous conditions.

**(C) Procedure**

**Chemotherapy for the Treatment of Cancer:**

Qualifications to Prescribe Chemotherapy

- Only medical oncologists, surgical oncologists, gynecologic oncologists, and oncology fellows are permitted to prescribe systemic and regional chemotherapy, with the exception of hormonal therapy, for the purpose of treating cancer.
- Urologists are permitted to prescribe chemotherapy for the regional treatment of urinary tract cancers (e.g., intravesicular therapy).
- If the patient has been taking oral chemotherapy at home or at a care facility, an admitting non-oncology service must consult an oncologist on admission for continuation of chemotherapy, unless otherwise stated in the following procedure Continuation of Home Oral Oncology Medications in Hospitalized Patients 139-IPP

Patient Education

- Physicians must inform patient of the risks, potential side effects, benefits, alternatives, and expectations of treatment prior to the initiation of chemotherapy and document in the physician progress notes.

Chemotherapy Orders

- All parenteral chemotherapy orders (excluding intravesicular therapy) must be written on a chemotherapy physician order form.
- Oral chemotherapy agents used to treat cancer for patients admitted to the hospital must be on a chemotherapy physician order form or ordered within the EMR.
- Orders must be signed personally by the medical oncologist, surgical oncologist, gynecologic oncologist, urologist, or oncology fellow prior to initiating therapy.
- Verbal orders are not permitted for chemotherapy except to hold, discontinue, or execute previously written chemotherapy orders.
- Pharmacists may accept orders for dose reduction or dose clarification.
- Verbal orders are acceptable for ancillary medications, including antiemetics and hydration.
- The following items must be completed on the chemotherapy physician order form prior to initiating therapy:
  - A. Name and second identifier
  - B. Regimen name (or Protocol number) and cycle number
  - C. Allergies
  - D. Patient diagnosis
  - E. Laboratory results or laboratory parameters for pending laboratory tests
  - F. Appropriate criteria to treat (e.g., based on relevant lab results or toxicities)

- G. Height and weight and body surface area, if indicated
- H. Ancillary medications and hydration
- I. Dosage in mg/m<sup>2</sup>, mg/kg, units/m<sup>2</sup>, or Area Under the Curve (AUC), if indicated
- J. Total dose of chemotherapy
- K. Date(s) of administration
- L. Route of administration
- M. Frequency
- N. Schedule and duration
- O. Medical oncologist, gynecologic oncologist, urologist, or surgical oncologist, or oncology fellow signature

- If a weight other than the patient's measured weight is used to calculate the patient's chemotherapy dose, the weight used must be documented on the chemotherapy physician order form (e.g., document the weight used and "ideal body weight").
- Height and weight must include the unit of measurement. A measured weight, rather than a stated weight, must be used.
- STAT orders for chemotherapy will not be accepted, except in cases of oncologic emergencies that require prompt treatment (e.g., leukemic blast crises).
- A patient history and physical must be on the patient's chart prior to initiating therapy.
- Dose and schedule modifications and variances in acceptable laboratory values or diagnostic tests (e.g., ejection fraction) will be documented in the patient's chart.

#### Intrathecal Chemotherapy

- Intrathecal chemotherapy must be written on a separate chemotherapy physician order form.
- Intrathecal chemotherapy that is to be given on different dates cannot be written on the same order form.
- More than one intrathecal agent may be written on the chemotherapy physician order form if the agents are to be given on the same day.

#### Use of Patient's Own Supply of Chemotherapy used for the Treatment of Cancer

- Patients may use their own supplies of chemotherapeutic medications if they have met the criteria established in the Department of Pharmacy Services Standard Policy and Procedure "Patient's Own Supply of Medications".
- The order for the medication must be written on a chemotherapy physician order form by an oncologist and include the statement "Patient may use own supply".
- Safe handling precautions will be followed during the preparation, transport, and administration of chemotherapeutic agents and when caring for patients. Safe handling precautions can be discontinued 48 hours after completion of the last chemotherapeutic agent.

#### **Chemotherapy for the Treatment of Non-Cancerous Conditions:**

##### Qualifications to Prescribe

- Only attending non-oncology physicians may prescribe chemotherapy for the treatment of non-cancerous conditions.
- All chemotherapies are restricted to use by the oncology/hematology service with the following exceptions:
  - Alemtuzumab (Campath) may be ordered by Transplant and Urology
  - Cyclophosphamide (Cytoxan) may be ordered by Critical Care, Dermatology, GI, Pulmonary, Rheumatology, Transplant, and Urology
  - Rituximab (Rituxan) may be ordered by Dermatology, Nephrology, and Rheumatology
  - Mercaptopurine (Purinethol, Purixan) may be ordered by GI
  - Oral methotrexate, megestrol (Megace), and hormonal therapies may be ordered by any physician for non-oncology indications
- A service may request the use of a particular chemotherapy for the treatment of a non-cancerous condition by consulting the appropriate service based on indication (i.e. Rheumatology for Rheumatoid Arthritis) and the ability of that service to order the treatment (restrictive criteria above).

Patient Education

- Physicians must inform patient of the risks, potential side effects, benefits, alternatives, and expectations of treatment prior to the initiation of chemotherapy and document in the physician progress notes.

Physician Orders

- It is not required that the orders are written on a chemotherapy physician order form.
- The indication for the chemotherapeutic agent must be included on the physician order. Verbal orders are not permitted for chemotherapy except to hold, discontinue or execute previously written chemotherapy orders.
- Pharmacists may accept orders for dose reduction or dose clarification.

**DEFINITIONS**

**Chemotherapy:** For the purposes of this policy and procedure, chemotherapeutic agents are defined as medications that are used to treat cancer and non-cancerous conditions.

**Biotherapy:** For the purpose of this policy and procedure, biotherapy agents are defined as medications derived from biologic sources or agents that affect biological responses that are used to treat cancer (Oncology Nursing Society, 2009). Categories of biotherapy include cytokines (excluding hematopoietic growth factors), monoclonal antibodies, conjugated antibodies, cellular therapies, vaccines, and gene therapy. For the purpose of this policy and procedure, biotherapy will be included in the term chemotherapy.

**REFERENCES**

Data Bases Reviewed: Cochane, PubMed, CINHAI

American Society for Clinical Oncology and the Oncology Nursing Society (January 27, 2009). Standards for safe chemotherapy administration. Public comment version. Retrieved May 5, 2009 from <https://ons.org/clinical/documents/pdfs/Chemo-safety-standards-public-comment.pdf>.

American Society for Health System Pharmacists (2002). ASHP guidelines for preventing medication errors with antineoplastic agents. American Journal of Health System Pharmacists, 59, 1648-1668.

Oncology Nursing Society (2009). Chemotherapy and biotherapy guidelines and recommendations for practice. Polovich, M., White, J. & Kelleher, L. (Eds.). Pittsburgh, Pa

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<p><b>Policies Superseded by This Policy:</b> 7-70-07 - Ordering of Antineoplastic Agents</p>	