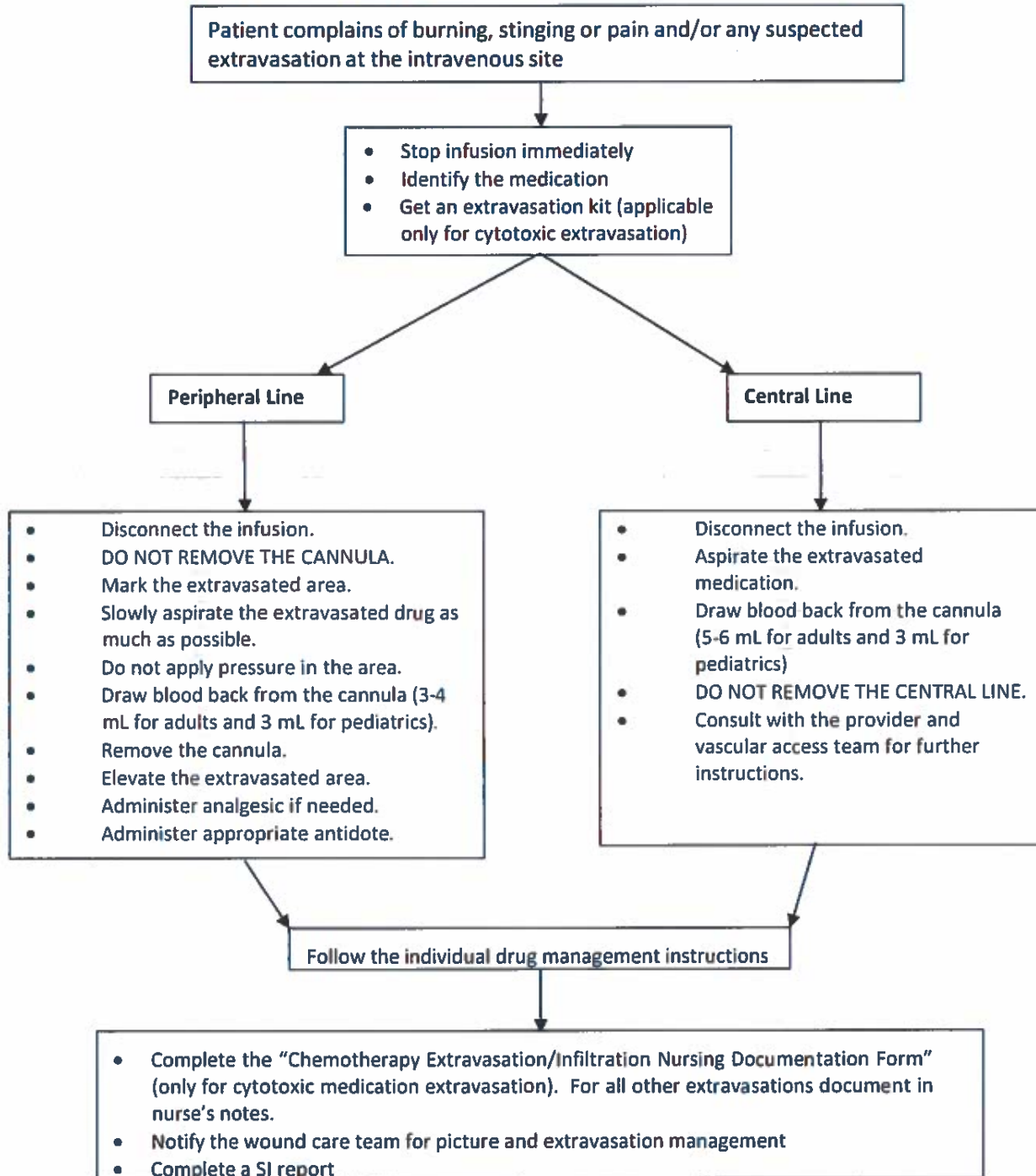
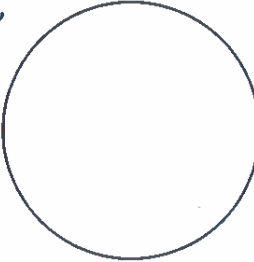


HARBOR-UCLA MEDICAL CENTER Extravasation Management Provider Order Form

Algorithm for Extravasation of Intravenous Medications



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Extravasation Management Provider Order Form

ANTIDOTE PREPARATION AND ADMINISTRATION INSTRUCTIONS		
Drug	Route, Frequency	Administration
Dextrazoxane	IV - Three 1-2 hour infusions through a different venous access	<ol style="list-style-type: none"> 1. Initiate dextrazoxone therapy as soon as possible (within 6 hours) after extravasation. Pharmacy will deliver upon receipt of MD order. 2. Dextrazoxane protocol: <ol style="list-style-type: none"> a. Day 1: 1000 mg/m² (max dose 2000 mg) infuse over 1-2 hours b. Day 2: 1000 mg/ m² (max dose 2000 mg) infuse over 1-2 hours c. Day 3: 500 mg/ m² (max dose 1000 mg) over 1-2 hours
Dimethyl sulfoxide (DMSO) 50 mL (54 gm) 50% w/w Aqueous solution	Topical, Frequency and duration depends on extravasation agent and provider's order	<ol style="list-style-type: none"> 1. Using 18 gauge needle and 3 mL syringe, withdraw 1 mL of DMSO. 2. Remove the needle and apply prescribed number of drops (usual dose: 4 drops/10 cm² of the skin surface over an area twice the size of the extravasation). The area to the right is 10 cm² 3. Allow to air dry without any dressings. 
Hyaluronidase	SQ One time	<ol style="list-style-type: none"> 1. Using 18 gauge needle and 3-6 mL syringe, withdraw prescribed dose of hyaluronidase. If the prescribed amount requires dilution follow dilution instructions. 2. Replace 18 gauge with 25 gauge or smaller needle and prime needle. 3. Using 25 gauge or smaller needle, inject the ordered dose subcutaneously in 5 equally divided doses of 2 mL each. See extravasation injection instructions below. 4. Press sterile 4x4's firmly over area of infiltration until region is dry.
Sodium Thiosulfate 10% (100 mg/mL)	SQ, Multiple (per MD order)	<ol style="list-style-type: none"> 1. Mix 4 mL of sodium thiosulfate 10% (100 mg/mL) with 6 mL sterile water = 0.17 M (moles/L) (total 10 ml). <ol style="list-style-type: none"> a. Roll sodium thiosulfate vial between the palms of one's hand to ensure uniform dispersion. b. Cleanse the top of sodium thiosulfate vial and inject 4 mL of air into the vial, then draw up sodium thiosulfate. c. Cleanse the top of sterile water vial and inject 6 mL of air and withdraw 6 mL of sterile water in a 12 mL syringe. d. With the same syringe draw up 4 mL of sodium thiosulfate (for a total of 10 mL of sterile water/sodium thiosulfate in the syringe). e. Mix contents by inverting syringe several times. Do not shake. 2. Using 25 gauge or smaller needle, inject the ordered dose subcutaneously in 5 equally divided doses of 2 ml each. See extravasation injection instructions below. 3. Press sterile 4x4's firmly over area of infiltration until region is dry.

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ANTIDOTE PREPARATION AND ADMINISTRATION INSTRUCTIONS		
Drug	Route, Frequency	Administration
Phentolamine (Regitine)	SQ, Multiple (Per MD order)	<ol style="list-style-type: none"> 1. Mix 5 mg of phentolamine (usual dose 5-10 mg) in 10 mL of 0.9% sodium chloride. <ol style="list-style-type: none"> a. Cleanse top of 0.9% sodium chloride vial, inject 10 mL of air and withdraw 10 mL of sodium chloride in 12 mL syringe. b. Cleanse the top of phentolamine vial. c. Inject 10 mL of sodium chloride to the phentolamine vial. d. Roll phentolamine vial between the palms of one's hand to ensure uniform dispersion. e. Cleanse the top of phentolamine vial and withdraw 10 mL of mixed drug into a syringe. f. Mix contents by inverting syringe several times. Do not shake. g. Inject within 12 hours of the extravasation. 2. Using 25 gauge or smaller needle, inject the ordered dose subcutaneously in 5 equally divided doses of 2 mL each. See extravasation injection instructions below. Blanching should be reversed immediately. 3. Additional injections may be required if blanching returns.
General Instructions for Injection into the Extravasation Site		<p>* Extravasation site</p> <ol style="list-style-type: none"> 1. Follow diagram to the right when giving extravasation injections. 2. Draw up the recommended dose of antidote in a syringe from the vial following aseptic technique. 3. Replace the needle with 25" gauge or 27" gauge needle. 4. Divide the recommended dose of antidote into 5 equal doses. 5. Inject the divided antidote subcutaneously around the extravasation site and the last dose in the center of the extravasation site. <div style="text-align: center;"> </div>