

# **Los Angeles General Medical Center**

## Chemotherapy and Biologic Medications Adult Infusion Rates

### Appendix A

## Recommended Titration Instructions

<b>Daratumumab</b>	
Dose 1 and 2	Start infusion at 50 mL/hr. As tolerated, increase infusion rate by 50 mL/hr every 60 minutes to a maximum of 200 mL/hr.
Dose 3+ if no reaction history	Start infusion at 100 mL/hr. As tolerated, increase infusion rate by 50 mL/hr every 60 minutes to a maximum of 200 mL/hr.
Dose 3+ if reaction history	Start infusion at 50 mL/hr. As tolerated, increase infusion rate by 50 mL/hr every 60 minutes to a maximum of 200 mL/hr.
<b>Docetaxel</b>	
<i>Patients receiving low-dose (less than 85 mg)</i>	
Dose 1 and 2	Start infusion at 20 mL/hr. As tolerated, double infusion rate every 15 minutes until reaching 80 mL/hr for 15 minutes. If tolerated, increase infusion rate to 100 mL/hr for 15 minutes. If tolerated, increase infusion rate to 125 mL/hr until completion.
Dose 3+ if no reaction history	Infuse over 1 hr.
Dose 3+ if reaction history	Start infusion at 20 mL/hr. As tolerated, double infusion rate every 15 minutes until reaching 80 mL/hr for 15 minutes. If tolerated, increase infusion rate to 100 mL/hr for 15 minutes. If tolerated, increase infusion rate to 125 mL/hr until completion.
<i>Patients receiving standard-dose (greater than or equal to 85 mg)</i>	
Dose 1 and 2	Start infusion at 20 mL/hr. As tolerated, double infusion rate every 15 minutes until reaching 80 mL/hr for 15 minutes. If tolerated, increase infusion rate to 100 mL/hr for 15 minutes. If tolerated, increase infusion rate to 250 mL/hr until completion.
Dose 3+ if no reaction history	Infuse over 1 hr.
Dose 3+ if reaction history	Start infusion at 20 mL/hr. As tolerated, double infusion rate every 15 minutes

	<p>until reaching 80 mL/hr for 15 minutes. If tolerated, increase infusion rate to 100 mL/hr for 15 minutes. If tolerated, increase infusion rate to 250 mL/hr until completion.</p> <p><i>If the patient has tolerated two or more consecutive infusions and has only a single reaction history, then the titration may be adjusted as follows:</i></p> <p>Infuse over 1 hr.</p>
<b>Doxorubicin liposomal</b>	
<i>Doses less than or equal to 60 mg:</i>	
All doses	Infuse over 1 hr.
<i>Doses greater than 60 mg:</i>	
Dose 1	Infuse at 60 mg/hr for 30 minutes. If tolerated, increase infusion rate to complete infusion in 1 hr.
Dose 2+ if no reaction history	Infuse over 1 hr.
Dose 2+ if reaction history	<p>Infuse at 60 mg/hr for 30 minutes. If tolerated, increase infusion rate to complete infusion in 1 hr.</p> <p><i>If the patient has tolerated two or more consecutive infusions and has only a single reaction history, then the titration may be adjusted as follows:</i></p> <p>Infuse over 1 hr.</p>
<b>Elotuzumab</b>	
Dose 1 ( <i>level 1</i> )	Start infusion at 30 mL/hr. As tolerated, double infusion rate every 30 minutes to a maximum of 120 mL/hr.
Dose 2 if no reaction ( <i>level 2</i> )	Infuse at 180 mL/hr for 30 minutes. If tolerated, increase infusion rate to 240 mL/hr until completion.
Dose 2 if reaction history	Start infusion at 30 mL/hr. As tolerated, double infusion rate every 30 minutes to a maximum of 120 mL/hr.

Dose 3+ if no reaction history ( <i>level 3</i> )	300 mL/hr
Dose 3+ if reaction history	<i>Infuse at the same rate as the maximum tolerated level. If the patient has tolerated two or more consecutive infusions and has only a single reaction history, then the titration may be increased to the next level.</i>
<b>Immune globulin (Gammagard)</b>	
<i>Patients except with increased risk of renal dysfunction or thrombotic complications:</i>	
All doses	Start infusion at 0.5 mL/kg/hr for 30 minutes. If tolerated, increase infusion rate to 1 mL/kg/hr. As tolerated, increase infusion rate by 1 mL/kg/hr every 30 minutes to a maximum of 5 mL/kg/hr.
<i>Patients with increased risk of renal dysfunction or thrombotic complications:</i>	
All doses	Start infusion at 0.5 mL/kg/hr for 30 minutes. If tolerated, increase infusion rate to 1 mL/kg/hr. As tolerated, increase infusion rate by 1 mL/kg/hr every 30 minutes to a maximum of 3 mL/kg/hr.
<b>Immune globulin (Gammagard SD)</b>	
<i>Patients except with increased risk of renal dysfunction or thrombotic complications:</i>	
All doses	Start infusion at 0.5 mL/kg/hr for 30 minutes. If tolerated, increase infusion rate to 1 mL/kg/hr. As tolerated, increase infusion rate by 1 mL/kg/hr every 30 minutes to a maximum of 4 mL/kg/hr.
<i>Patients with increased risk of renal dysfunction or thrombotic complications:</i>	
All doses	Start infusion at 0.5 mL/kg/hr for 30 minutes. If tolerated, increase infusion rate to 1 mL/kg/hr. As tolerated, increase infusion rate by 1 mL/kg/hr every 30 minutes to a maximum of 3 mL/kg/hr.
<b>Infliximab</b>	
All doses	Start infusion at 10 mL/hr. As tolerated, double infusion rates every 15 minutes until reaching 80 mL/hr for 15 minutes. If tolerated, increase to 150 mL/hr for 30

	minutes. If tolerated, increase to 250 mL/hr until completion.
<b>Isatuximab</b>	
Dose 1	Start infusion at 25 mL/hr for 60 minutes. If tolerated, increase infusion rate to 50 mL/hr. As tolerated, increase infusion rate by 25 mL/hr every 30 minutes to a maximum of 150 mL/hr.
Dose 2 if no reaction history	Start infusion at 50 mL/hr for 30 minutes. If tolerated, increase infusion rate to 100 mL/hr for 30 minutes. If tolerated, increase infusion rate to 200 mL/hr until completion.
Dose 3+ if no reaction history	200 mL/hr
Dose 2+ if reaction history	Start infusion at 25 mL/hr for 60 minutes. If tolerated, increase infusion rate to 50 mL/hr. As tolerated, increase infusion rate by 25 mL/hr every 30 minutes to a maximum of 150 mL/hr.
<b>Mirvetuximab soravtansine</b>	
Dose 1	Start infusion at 60 mL/hr. As tolerated, increase infusion rate by 120 mL/hr every 30 minutes to a maximum of 300 mL/hr.
Dose 2+ if no reaction history and previous final infusion rate was 300 mL/hr	300 mL/hr
Dose 2+ if no reaction history and previous final infusion rate was between 180 and 300 mL/hr	Start infusion at 180 mL/hr for 30 minutes. If tolerated, increase infusion rate to 300 mL/hr.
Dose 2+ if reaction history or previous final infusion rate was less than 180 mL/hr	Start infusion at 60 mL/hr. As tolerated, increase infusion rate by 120 mL/hr every 30 minutes to a maximum of 300 mL/hr.
<b>Obinutuzumab</b>	
<i>Diagnosis of CLL</i>	
Dose 1 (100 mg)	25 mL/hr
Dose 2 (900 mg) if no reaction history	Start infusion at 12.5 mL/hr. As tolerated, increase infusion rate by 12.5 mL/hr every 30 minutes to a maximum of 100 mL/hr.

Dose 2 (900 mg) if reaction history	Start infusion at 6.25 mL/hr. As tolerated, increase infusion rate by 12.5 mL/hr every 30 minutes to a maximum of 100 mL/hr.
Dose 3+ if no reaction history and previous final infusion rate was greater than or equal to 25 mL/hr	Start infusion at 25 mL/hr. As tolerated, increase infusion rate by 25 mL/hr every 30 minutes to a maximum of 100 mL/hr.
Dose 3+ if reaction history or previous final infusion rate was less than 25 mL/hr	Start infusion at 12.5 mL/hr. As tolerated, increase infusion rate by 12.5 mL/hr every 30 minutes to a maximum of 100 mL/hr.
<i>Diagnosis of FL</i>	
Dose 1 (1000 mg)	Start infusion at 12.5 mL/hr. As tolerated, increase infusion rate by 12.5 mL/hr every 30 minutes to a maximum of 100 mL/hr.
Dose 2 and 3 if no reaction history and previous final infusion rate was greater than or equal to 25 mL/hr	Start infusion at 25 mL/hr. As tolerated, increase infusion rate by 25 mL/hr every 30 minutes to a maximum of 100 mL/hr.
Dose 2 and 3 if reaction history or previous final infusion rate was less than 25 mL/hr	Start infusion at 12.5 mL/hr. As tolerated, increase infusion rate by 12.5 mL/hr every 30 minutes to a maximum of 100 mL/hr.
Dose 4+ if no reaction history	Infuse at 25 mL/hr for 30 minutes. If tolerated, increase infusion rate to 225 mL/hr until completion.
Dose 4+ if reaction history	Start infusion at 12.5 mL/hr. As tolerated, increase infusion rate by 12.5 mL/hr every 30 minutes to a maximum of 100 mL/hr.
<b>Paclitaxel</b>	
<i>Patients receiving low-dose (less than 100 mg/m<sup>2</sup>)</i>	
Dose 1 and 2	Start infusion at 20 mL/hr. As tolerated, double infusion rate every 15 minutes until reaching 80 mL/hr for 15 minutes. If tolerated, increase infusion rate to 100 mL/hr for 15 minutes. If tolerated, increase infusion rate to 150 mL/hr until completion.
Dose 3+ if no reaction history	Infuse over 1 hr.
Dose 3+ if reaction history	Start infusion at 20 mL/hr. As tolerated, double infusion rate every 15 minutes until reaching 80 mL/hr for 15 minutes. If tolerated, increase infusion rate to 100

	<p>mL/hr for 15 minutes. If tolerated, increase infusion rate to 150 mL/hr until completion.</p> <p><i>If the patient has tolerated four or more consecutive infusions and has only a single reaction history, then the titration may be adjusted as follows:</i></p> <p>Infuse over 1 hr.</p>
<i>Patients receiving intermediate-dose (100 to less than 135 mg/m<sup>2</sup>)</i>	
All doses	<p>Start infusion at 20 mL/hr. As tolerated, double infusion rate every 15 minutes until reaching 80 mL/hr for 15 minutes. If tolerated, increase infusion rate to 100 mL/hr for 15 minutes. If tolerated, increase infusion rate to 300 mL/hr until completion.</p>
<i>Patients receiving high-dose (greater than or equal to 135 mg/m<sup>2</sup>)</i>	
All doses	<p>Start infusion at 20 mL/hr. As tolerated, double infusion rate every 15 minutes until reaching 80 mL/hr for 15 minutes. If tolerated, increase infusion rate to 100 mL/hr for 15 minutes. If tolerated, increase infusion rate to 200 mL/hr until completion.</p>
<b>Rituximab</b>	
Dose 1	<p>Start infusion at 50 mL/hr. As tolerated, increase infusion rate by 50 mL/hr every 30 minutes to a maximum of 400 mL/hr.</p>
<i>Diagnosis other than FL or DLBCL, clinically significant cardiovascular disease, or absolute lymphocyte count greater than or equal to 5K</i>	
Dose 2+ if no reaction history	<p>Start infusion at 100 mL/hr. As tolerated, increase infusion rate by 100 mL/hr every 30 minutes to a maximum of 400 mL/hr.</p>
Dose 2+ if reaction history	<p>Start infusion at 50 mL/hr. As tolerated, increase infusion rate by 50 mL/hr every 30 minutes to a maximum of 400 mL/hr.</p> <p><i>If the patient has tolerated two or more consecutive infusions and has only a</i></p>

	<p><i>single reaction history, then the titration may be adjusted as follows:</i></p> <p>Start infusion at 100 mL/hr. As tolerated, increase infusion rate by 50 mL/hr every 30 minutes to a maximum of 400 mL/hr.</p>
<p><i>Diagnosis of FL or DLBCL without clinically significant cardiovascular disease or absolute lymphocyte count greater than or equal to 5K</i></p>	
Dose 2+ if no reaction history	<p>Infuse at X mL/hr for 30 minutes. If tolerated, infuse at Y mL/hr for 60 minutes.</p> <p>[X = 0.4 x total dose, Y = 0.8 x total dose]</p> <p><i>These instructions are in accordance with prescribing information for 20% of dose over 30 minutes, 80% of dose over 60 minutes.</i></p>
Dose 2+ if reaction history	<p>Start infusion at 50 mL/hr. As tolerated, increase infusion rate by 50 mL/hr every 30 minutes to a maximum of 400 mL/hr.</p> <p><i>If the patient has tolerated two or more consecutive infusions and has only a single reaction history, then the titration may be adjusted as follows:</i></p> <p>Start infusion at 100 mL/hr. As tolerated, increase infusion rate by 50 mL/hr every 30 minutes to a maximum of 400 mL/hr.</p>

\*When titration is to be done “as tolerated” or “if tolerated,” the registered nurse may consider prior exposures in determining tolerability. For example, the nurse may choose to use the maximal tolerated rate during prior infusions as the maximum rate during a current infusion.