



NON-MEDICATION ORDERS

BLOODWORK TIMING

- Pre-Infusion #1
- Pre-Infusion #2
- _____ weeks after each infusion
- q _____ months
- OTHER

BLOODWORK TO BE DONE

- CBC
- Electrolytes
- Creatinine
- Serum Calcium
- Serum Albumin
- Serum Phosphate
- Serum Magnesium
- Serum Alkaline Phosphatase
- OTHER

DRUG ALLERGIES

List Drug	Describe Reactions/Allergies
_____	_____
_____	_____
_____	_____

No known drug reaction/allergies

MEDICATION ORDERS

TIMING OF PAMIDRONATE INFUSIONS

- Patient to be given the infusion regimen of Pamidronate as outlined below every _____ month(s) for a total of _____ infusions then reassess.

PAMIDRONATE INFUSION

- Give PAMIDRONATE _____ mg in _____ mL Normal Saline to be given IV ADC over _____ hours

Typical Dosing

- Osteoporosis is 30-60 mg over 2-3 hours every 3 months
- Ankylosing Spondylitis 60 mg over 3-4 hours qmonthly x 6 months

Typical Concentrations

- 30 mg/250 mL, 60 mg/500 mL, 90 mg/500 mL, 120 mg/500 mL Normal Saline

Maximum Infusion Rates

- 60 mg/hr for Osteoporosis, 15 mg/hr for Paget's, 22.5 mg/hr for multiple myeloma – Slow infusion rate (> 2 hours may reduce risk for renal toxicity, particularly in patients with pre-existing renal disease))

- Diphenhydramine (Benadryl®) 50 mg IV q4-6h prn
- Acetaminophen (Tylenol®) 650 mg PO q4-6h prn

POST-PAMIDRONATE INFUSION

- D/C IV & D/C Home
- Other: _____

PHYSICIAN'S SIGNATURE	YR.	MO.	DAY	TIME
	PHYSICIAN'S PRINTED NAME	AUTHORIZED PHYSICIAN'S SIGNATURE		