SECTION 8B: PUMPS & DRUG ADMINISTRATION	POLICY: 8B.42
POLICY: ACTEMRA (TOCILIZUMAB) ADMINISTRATION	PAGE: 1 OF: 3

PURPOSE:

- To provide instruction on the safe and proper administration of Actemra (Tocilizumab).

POLICY:

- Actemra will be administered by a trained registered nurse in accordance with a physician's order, any available / provided pharmacy or manufacturer instructions, and Agency policy.

GENERAL INFORMATION:

- Actemra works to directly block the action of a protein in the body called Interleukin-6 (IL-6) which is believed to play a part in different types of arthritis. It is used to treat moderate to severe Rheumatoid Arthritis (RA), Systemic Sclerosis with Early Interstitial Lung Disease (SSc-ILD), Giant Cell Arthritis (GCA), Polyarticular Juvenile Idiopathic Arthritis (PJIA), and Systemic Juvenile Idiopathic Arthritis (SJIA).

SPECIAL CONSIDERATIONS:

- Actemra may increase the risk of getting a serious infection. If the patient reports having any symptoms of infection such as fever, chills, muscle aches, cough, blood in phlegm shortness of breath, runny nose, sore throat, red or painful skin or sores on their body, excessive tiredness, diarrhea, stomach pain, weight loss, or pain during urination, the attending nurse shall notify the Agency so that notification to Pharmacy and MD can be coordinated.

- Laboratory monitoring is generally recommended due to potential consequences of treatment-related laboratory abnormalities in neutrophils, platelets, lipids, and liver function tests. As ordered, the Agency nurse will obtain lab work during infusion visits and the Agency will ensure results are communicated to the pharmacy/ordering provider.

- A registered nurse shall remain with the patient for the entirety of the infusion.

- Actemra is administered as a 60-minute intravenous (IV) drip infusion (unless otherwise noted in the MD order). The recommended starting dose is 4 mg/kg every 4 weeks and based on clinical response may be increased to 8 mg/kg every 4 weeks. Dosing is calculated by the MD based on the patient's weight. The Agency nurse shall verify the dose.

- Actemra vials should be allowed to equilibrate to room temperature prior to use.
    - Actemra should be stored at 2° to 8°C (36° to 46°F). If there are any doubts about the storage and viability of the drug, reach out to the Agency immediately so that confirmation may be sought from the Pharmacy.

- The Agency nurse will monitor for any infusion-related reactions and hypersensitivity reactions including anaphylaxis, dyspnea, bronchospasm, urticaria, flushing, rash, and increased blood pressure and heart rate.
    - If anaphylaxis or other serious infusion-related reactions occurs, discontinue administration of Actemra immediately and initiate appropriate treatment to include administration of anaphylactic medications as necessary and activating EMS.
    - Notify the agency as soon as possible so that the Pharmacy/MD may be notified.

PROCEDURE:

1. Obtain and verify physician's orders including any premedication orders, concentration, rate of infusion, and emergency protocols (in-date anaphylactic kit on-hand). If you notice any discrepancies in the orders, contact the Agency before proceeding.

2. Explain procedure and purpose to patient/caregiver.

3. Perform initial Hand Hygiene and maintain throughout the procedure.

4. Assemble supplies on a clean, dry surface. Ensure all supplies needed to complete the infusion from beginning to end are available. If any supplies are missing, notify the Agency immediately and prior to starting the infusion process.

5. Assess and record patient's vital signs to establish a baseline and ensure vital signs are not contraindicative to starting the infusion.

6. Establish IV access or ensure access is in working condition. DO NOT tamper with medication until patent IV access is established and flushed. After 2 unsuccessful IV attempts, contact Agency immediately for further instruction on how to proceed.

7. Actemra must be diluted. Actemra comes in a sterile, ready-to-use, preservative-free solution for intravenous (IV) infusion at a concentration of 20 mg/ml. Visually inspect the vial for particulate matter and/or discoloration prior to dilution. The solution should appear colorless to pale yellow.
    - If the solution appears to have particulate matter or is discolored, DO NOT use it.
    - Reach out to the Agency immediately so that the Pharmacy can be notified.
    - Pharmacy will advise as to how to handle the medication (i.e. disposal, or return shipping, etc.).

8. Check the expiration dates on each vial to ensure they are within date.

9. Determine the number of vials and total volume (mL) needed to reach the ordered dose. Draw up the prescribed dose in a syringe.

10. Remove 0.9% Sodium Chloride from the 100 mL infusion bag equal to the total volume of Actemra drawn up in Step 10. The volume of the Normal Saline and the medication should equal a total of 100 ml **unless other instructions are provided on the medication label**.

    ******If the Pharmacy sends a 250ml bag of 0.9% Sodium Chloride, remove 150mL plus the volume of Actemra **unless other instructions are provided on the medication label**.

11. Inject the medication into the bag of 0.9% Sodium Chloride. Gently mix. DO NOT shake.

12. Begin the infusion. Administer Actemra intravenously over 60 minutes (unless another length of time is noted in the order). In most cases, Actemra will be administered via gravity tubing unless the Pharmacy has provided a peristaltic pump.

13. Obtain another set of vital signs 15 minutes into the infusion and at infusion end. Your documentation should include at least 3 sets of vital signs: Baseline, 15 minutes after infusion start, and infusion end unless otherwise noted in the order).

14. Once the infusion is complete, flush the IV with 10ml of saline (unless a different amount is noted in the MD order).

15. Disconnect the patient and remove the IV.

16. Place a pressure dressing at the IV site.

17. Clean up your workspace and properly discard all waste ensuring that all needles have been placed in a sharps container.

18. Document the procedure, patient's response to the procedure, and record lot numbers and expiration dates for all vials used.

19. **Note**: If the infusion is not completed, notify the Agency immediately so the Pharmacy can be notified, and advisement received on how to store or dispose of the medication properly.

    - Examples for incomplete infusions include losing IV access that is unable to be re-established, symptoms of intolerance, medication is unusable or compromised (broken / leaking vial or discolored or altered in normal appearance). **NEVER** discard of the medication without speaking to the Agency first.