

Hospitalize as: ☐ Outpatient/Observation      **Diagnosis: Systemic Lupus Erythematosus (SLE)**

**NOTE:** Screen patient at each visit for active infection before treatment is given. If active infection is present, notify provider immediately.  
Screen patient for pregnancy status. Notify provider for possible pregnancy.

***All "pre-checked" orders will automatically be enacted unless a specific order is written to the contrary. Any additional orders must be "checked" to activate.***

- ☒ Patient weight prior to infusion.
- ☒ RN to review "Medication Guide" with patient prior to each treatment
- ☒ Live vaccinations should NOT be given within 30 days before or concurrently with Benlysta

**Pre-medication (Check to activate)**

**NOTE:** It is unknown if pre-medications prevent or reduce the severity of hypersensitivity reactions with Benlysta. Consider pre-meds for patients at high risk (e.g. patients with multiple drug allergies) or with a history of infusion-related reactions.

- ☐ Acetaminophen 650 mg PO X 1
- ☐ Diphenhydramine 25 mg PO X 1
- ☐ Ondansetron (Zofran) 4 mg IV X 1 PRN for nausea/vomitting.
- ☐ Other: \_\_\_\_\_

**DOSAGE:**

- ☒ Belimumab (Benlysta) 10 mg/kg IV infusion diluted in 0.9% sodium chloride 250 ml.  
Administer over 60 minutes @ 250 ml/hour through a dedicated IV line.

**Schedule of Infusions:**

- ☒ Loading dose every 2 weeks X 3 doses: ☐ Week 0      ☐ Week 2      ☐ Week 4
- ☒ Maintenance: every 4 weeks X 12 months.
- ☒ Patient must remain in ITC for 60 minutes to monitor for signs and symptoms of anaphylaxis following 1st and 2nd doses, AND 30 minutes following subsequent doses. Hypersensitivity reactions can be delayed and occur the day of the infusion (several hours after) or the next day.

**Infusion Reaction Protocol: *The following orders will be enacted unless a specific order is written to the contrary:***

For **MINOR** infusion reaction (fever, flushing, chills):

- Stop infusion for 10 minutes
- Restart infusion at 125 ml/hour for 15 minutes, then increase to 250 ml/hr if patient tolerates

For **MODERATE** infusion reaction (pruritis, urticaria, arthralgia, rash, nausea/vomiting):

- STOP infusion
- Give diphenhydramine 25 mg IV X 1. May repeat X 1 in 10 minutes if reaction does not subside.
- Restart infusion at 125 ml/hr only if patient is asymptomatic and vital signs are stable within 15 minutes. Increase by 50 ml/hr every 15 minutes as tolerated to a max of 250 ml/hr.
- Notify Physician

For **SEVERE** infusion reaction or anaphylaxis (hypotension, hypertension, chest pain, dyspnea, wheezing, palpitations):

- **STOP administration of Benlysta immediately**
- For **ANAPHYLAXIS**: Epinephrine (EpiPen) 0.3 mg (0.3 ml) IM x 1 STAT, administered in anterolateral aspect of the thigh
- For **HYPOTENSION**: Bolus IV 0.9% Sodium Chloride 1000 ml over 1 hour
- Diphenhydramine (Benadryl) 25 mg IV X 1 dose
- Methylprednisolone (Solu-Medrol) 125 mg IV X 1 dose
- Notify physician
- Transport the patient to the emergency department

\_\_\_\_\_  
**Physician Signature**

\_\_\_\_\_  
**Date / Time**

Wentworth-Douglass Hospital  
PHYSICIAN ORDERS

**BELIMUMAB (BENLYSTA)**



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