CLINICAL POLICY
Cancer Therapy Ordering and Administration - Part 2: Cancer Chemotherapy Administration

A. EFFECTIVE DATE:
   October 19, 2021

B. PURPOSE:
   To define the process for safe administration of cancer chemotherapy.

C. POLICY:

1. Chemotherapy and immunotherapy agents used as treatment for cancer will only be administered by Registered Nurses who have successfully completed the Oncology Nursing Society’s Chemotherapy and Immunotherapy Certificate Course or the Oncology Nursing Society’s Chemotherapy and Immunotherapy: Fundamentals of Administration course and have completed the UCONN Health clinical competency evaluation or by a provider credentialed in chemotherapy administration.
   i. Exception: Chemotherapeutic agents for non-oncologic indications (i.e., single agent methotrexate for obstetrical ectopic pregnancy emergencies, single-agent methotrexate for non-oncologic medical conditions, etc) may be administered by non-oncology RNs who has been trained in the safe handling of hazardous drugs.

2. Oral chemotherapy and immunotherapy drugs prescribed to treat oncologic diagnoses must be administered by a chemotherapy-competent nurse or by a provider credentialed in chemotherapy administration.
   i. Oral chemotherapy agents prescribed to treat non-oncologic diagnoses may be administered by a non-chemotherapy competent nurse or provider. Proper personal protective equipment must be worn.

3. All cancer therapy orders must be independently verified by two chemotherapy-competent RNs prior to administration. In cases where two chemotherapy-competent RNs are not available, a provider credentialed in chemotherapy administration or chemotherapy-competent pharmacist may also double check the chemotherapy.
   i. Two RNs (or an RN and a provider as outlined above) must sign off the chemotherapy verification process in the medical record to document that the double check of the order has been completed.
   ii. Two RNs (or an RN and a provider as outlined above) must sign off on the MAR at the point of administration for any high-alert medication.
4. A Consent for Administration of Chemotherapy form must be signed by both the patient (and legal representative) and provider and be present in the patient’s medical record prior to the first administration of an antineoplastic regimen and prior to any change in regimen (refer to HAM policy 08-097, Chemotherapy Consent).

5. Staff administering chemotherapy will practice appropriate safe handling practices with any drug determined to be hazardous according to the UConn Health Pharmacy Hazardous Drug Assessment of Risk. Refer to HAM policy 11-019: Safe Handling of Hazardous Drugs

6. Chemotherapy / hazardous drug waste must be discarded in the appropriate containers designated as specified per individual drug label from pharmacy and / UConn Health Pharmacy Hazardous Drug Assessment of Risk.

7. RN will administer chemotherapy infusions using an infusion pump with smart pump technology.
   i. **Exception:** Vinca alkaloid (vincristine, vinblastine, vinorelbine) short infusions via mini-bag will never be administered with an IV pump due to the risk of vesicant extravasation. Mini-bag vinca alkaloid short infusions will be administered by gravity using drip factor calculations and RN will remain present throughout infusion to ensure vesicant precautions are maintained.

8. Verification of chemotherapy orders will be documented by 2 chemotherapy-competent RNs in the electronic medical record using the chemotherapy checklist function prior to administration.

D. **SCOPE:**

Registered nurses and practitioners credentialed in the administration of cancer chemotherapy

E. **DEFINITIONS:**

1. **Chemotherapy** – All antineoplastic agents used to treat cancer, administered through oral, parenteral or other routes. Types include targeted agents, alkylating agents, antimetabolites, plant alkaloids, topoisomerase inhibitors, antitumor antibiotics, monoclonal antibodies, biologics and related agents. Hormonal therapies are not included in the definition of chemotherapy.

2. **Chemotherapy regimen** – One or more chemotherapeutic agents used alone or in combination in a well-defined protocol or course of treatment, generally administered cyclically.

F. **MATERIAL(S) NEEDED:**

1. Chemotherapeutic / immunotherapy agent
2. Appropriate vascular access supplies based on patients access statue (central line / peripheral line)
3. Hazardous drug-rated personal protective equipment (PPE)
4. Infusion pump with guardrails Primary IV solution
5. Emergency medications available (in Pyxis) Suction setup/O2 setup
6. Luer-locking closed-system transfer devices (CSTD)
7. Any additional required PPE

G. **PROCEDURE:**

1. **For Assessment and Preparation, the chemotherapy-competent Registered Nurse will refer to:**
   a. ELSEVIER Clinical Skills Manual: Antineoplastic Drug Administration: Pretreatment Verification (Oncology)
b. ELSEVIER Clinical Skills Manual: Antineoplastic Drug Administration: Pretreatment Assessment, Initial and Subsequent Cycles (Oncology)

2. For Administration, the chemotherapy-competent Registered Nurse will refer to the following as appropriate:
   a. ELSEVIER Clinical Skills Manual: Antineoplastic Drug Administration: Intravenous (Oncology)
   b. ELSEVIER Clinical Skills Manual: Antineoplastic Drug Administration: Vesicant and Irritant Agents (Oncology)
   c. ELSEVIER Clinical Skills Manual: Hypersensitivity Reactions Management (Oncology)
   d. ELSEVIER Clinical Skills Manual: Targeted Therapies and Immunotherapy: General Principles (Oncology)
   e. ELSEVIER Clinical Skills Manual: Antineoplastic Drug Administration: Subcutaneous (Oncology)
   f. ELSEVIER Clinical Skills Manual: Antineoplastic Drug Administration: Oral (Oncology)
   g. ELSEVIER Clinical Skills Manual: Antineoplastic Drug Administration: Intraperitoneal (Oncology)

H. ATTACHMENTS:
   HAM policy 08-097, Chemotherapy Consent
   HAM policy 11-019, Safe Handling of Hazardous Drugs
   HAM policy 08-041-Part 1, Cancer Therapy Ordering and Administration - Part 1: Chemotherapy Ordering

I. REFERENCES:

J. SEARCH WORDS:
   Chemotherapy, cancer therapy, chemotherapy regimen, chemotherapy administration

K. ENFORCEMENT:
   Violations of this policy or associated procedures may result in appropriate disciplinary measures in accordance with University By-Laws, General Rules of Conduct for All University Employees, applicable collective bargaining agreements, the University of Connecticut Student Code, other applicable University Policies, or as outlined in any procedures document related to this policy.

L. STAKEHOLDER APPROVALS:
   On File

M. COMMITTEE APPROVALS:
   None
N. **FINAL APPROVAL:**

1. Andrew Agwunobi, MD (Signed) .......................... 10/21/2021
   Andrew Agwunobi, MD, MBA
   **UConn Health Chief Executive Officer**

2. Anne D. Horbatuck, (Signed) ............................ 10/21/2021
   Anne D. Horbatuck, RN, BSN, MBA
   **Clinical Policy Committee Co-Chair**

3. Scott Allen, MD (Signed) ................................. 10/21/2021
   Scott Allen, MD
   **Clinical Policy Committee Co-Chair**

4. Caryl Ryan (Signed) ........................................ 10/20/2021
   Caryl Ryan, MS, BSN, RN
   **Interim Chief Operating Officer, JDH**
   **VP Quality and Patient Services & Chief Nursing Officer**

O. **REVISION HISTORY:**

   - Date Issued: 10/2013
   - Date Revised: 6/2018 Titled, HAM 08-041 Part VIII, Revised and re-named HAM 08-041 Part 3, 5/2021
   - Date Reviewed: