

## Ocrelizumab (Ocrevus®)

Reduce direct handling to a minimum and wear appropriate personal protective equipment		
Caution: High Administration Risk Rating		
Form & Storage	Concentrate for solution for infusion	Store in refrigerator 2°C-8°C. Keep in outer carton to protect from light
Reconstitution	Already in solution- 300mg/10mL <b>MUST be further diluted before administration</b> Inspect visually prior to dilution Clear to slightly opalescent, and colourless to pale brown solution	
Compatibility & Stability	Sodium Chloride 0.9% <b>ONLY</b>	
Premedication	<b>30 mins before each infusion</b> Methylprednisolone 100mg/100mL sodium chloride 0.9% Chlorphenamine 10mg IV/other antihistamine Paracetamol 1g po	
Administration	<b>IV Infusion</b>	
	<b>To prepare a 300mg infusion</b> <ul style="list-style-type: none"> <li>Add the contents of one vial (10mL) to 250mL sodium chloride 0.9%.</li> </ul> <b>To prepare a 600mg infusion</b> <ul style="list-style-type: none"> <li>Add the contents of two vials (20mL) to 500mL sodium chloride 0.9%.</li> </ul> <p>The infusion concentration is approximately 1.2mg in 1mL.          Ensure the infusion is at room temperature before administering.          Give via a 0.2 or 0.22micron <b>in-line filter</b>. This filter <b>B Braun Sterifix® 0.2µ Ref 4099303</b> is available to order from stores          See below for rates of administration.</p> <p><b>Initial Dose: 600mg</b> dose is administered as two separate intravenous infusions; first as a 300mg infusion, followed 2 weeks later by a second 300 mg infusion</p> <ul style="list-style-type: none"> <li>Initiate the infusion at a rate of 30 mL/hour for 30 minutes</li> <li>The rate can be increased in 30 mL/hour increments every 30 minutes to a maximum of 180 mL/hour.</li> <li>Each infusion should be given over approximately 2.5 hours</li> </ul> <p><b>Subsequent doses</b> of Ocrevus® thereafter are administered as a single 600 mg intravenous infusion every 6 months. The first subsequent dose of 600 mg should be administered six months after the first infusion of the initial dose.</p> <ul style="list-style-type: none"> <li>Initiate the infusion at a rate of 40 mL/hour for 30 minutes</li> <li>The rate can be increased in 40 mL/hour increments every 30 minutes to a maximum of 200 mL/hour</li> <li>Each infusion should be given over approximately 3.5 hour</li> </ul>	

*This information has been summarised to act as a guide for those administering IV medication. The monograph should be used in conjunction with the drug data sheet and BNF for information on dose, adverse effects, cautions and contra-indications. Further information is available from Pharmacy on 22146 or 22542*

	<p><b>Faster rate</b> If patients did not experience a serious infusion-related reaction (IRR) with any previous Ocrevus® infusion, a shorter (2-hour) infusion can be administered for subsequent doses. A minimum interval of 5 months should be maintained between each dose of Ocrevus®</p> <ul style="list-style-type: none"> <li>• Initiate the infusion at a rate of 100 mL/hour for the first 15 minutes</li> <li>• Increase the infusion rate to 200 mL/hour for the next 15 minutes</li> <li>• Increase the infusion rate to 250 mL/hour for the next 30 minutes</li> <li>• Increase the infusion rate to 300 mL/hour for the remaining 60 minutes</li> <li>• Each infusion should be given over approximately 2 hours</li> </ul>
<b>Documentation Requirements</b>	Document batch numbers and expiry dates of vials in medical notes
<b>Monitoring</b>	<ul style="list-style-type: none"> <li>• Baseline vital signs and every 30 minutes during infusion and during post infusion observation (1 hour)</li> <li>• Observe cannula site regularly</li> <li>• Be vigilant for infusion Related Reactions (IRR)</li> <li>• Blood forms given on discharge for next infusion (6 Months) FBC, Renal/Liver/Bone profile, Immunoglobulins (IgG)</li> </ul>
<b>Adverse Drug Reactions</b>	<p>Infusion Related Reactions</p> <p><b>Mild to Moderate</b> - the infusion rate should be reduced to half the rate at the onset of the event. This reduced rate should be maintained for at least 30 minutes. If tolerated, the infusion rate may then be increased according to the patient's initial infusion rate.</p> <p><b>Severe</b> - stop infusion, get medical assistance, treat symptomatically. Have anaphylaxis kit available. May restart again only when symptoms have resolved and under medical advisement.</p>
<b>Disposal</b>	Purple lidded bin for waste from this infusion
<b>Additional Information</b>	<p>Rates sheets attached</p> <p>Patient not to self-drive home after administration of Chlorphenamine (sedating antihistamine)</p> <p>See <b>PPG-CUH-CUH-243</b> <u>Policy Procedure and Guidelines for Management of Patients Attending CUH Infusion Unit for Intravenous Therapy CUH</u> for more information</p>

**Information provided relates to Ocrevus® Manufactured by Roche**

**Date:\_\_\_\_\_ Ocrevus® No 1 (300mg): Infusion time 3 hours**  
**Total Volume 260 mls Conc. 1.15mg/ml**

TIME	RATE	VOLUME ml(30min s)	Temp	B/P	R/R	Pulse	O2 sats	PVAD checked	Initials
	30mls/hr	15mls							
	60mls/hr	30mls							
	90mls/hr	45mls							
	120mls/hr	60mls							
	150mls/hr	75mls							
	180mls/hr	90mls							

**Date:\_\_\_\_\_ Ocrevus® No 2 (300mg): Infusion time 3 hours**  
**Total Volume 260 mls**

TIME	RATE	VOLUME (30mins)	Temp	B/P	R/R	Pulse	O2 sats	PVAD checked	Initials
	30mls/hr	15mls							
	60mls/hr	30mls							
	90mls/hr	45mls							
	120mls/hr	60mls							
	150mls/hr	75mls							
	180mls/hr	90mls							