| | REGIONAL ADULT PARENTERAL DRUG MONOGRAPH | | |
|--|--|------------------------|----------------|
| Southern Health | generic name sarilumab | | |
| Effective Date: March 2022 | CLASSIFICATION Monoclonal Antibody | OTHER NAMES Kevzara | PAGE 1 of 1 |
| Revised Date: | · · · | | |
| ADMINISTRATION POLICY: IV Intermittent - May be administered by a nurse IV Bolus - DO NOT give IM Injection - DO NOT give Subcutaneous - May be administered by a nurse | | | |
| RECONSTITUTION/DILUTION/ADMINISTRATION: Supplied as 200 mg/1.14 mL syringe. Keep in refrigerator | | | |
| IV Intermittent - Using Subcut formulation, Leave syringe to sit at room temperature for 30 minutes Solution should be clear and colorless to pale yellow Do not shake Dilute in 100 mL normal saline and administer over 1 hour | | | |
| DOSAGE: | | | |
| | 400 mg IV x 1 | | |
| | 400 mg | | |
| - | 400 mg | | |
| STABILITY/COMPATIBILITY: | | | |
| Stability of Final Admixture: Maximum 6 hours at room temperature | | | |
| | Maximum 24 hours refrigerated | | |
| Compatibility: Compatible with NaCl 0.9% | | | |
| PRECAUTIONS, POTENTIAL ADVERSE REACTIONS: | | | |
| Gastrointestinal: perforation | | | |
| • Infection: serious and potentially fatal infections (including active tuberculosis, invasive fungal, bacterial, viral and | | | |
| other opportunistic infections) have been reported. Most of the serious infections have occurred in patients on | | | |
| concomitant immunosuppressive therapy. | | | |
| • Hypersensitivity reactions: injection-site rash, rash and urticaria. | | | |
| Anaphylaxis | | | |
| ADDITIONAL NOTES AND NURSING CONSIDERATIONS: | | | |
| • Healthcare provider must have the ability to respond to infusion reactions. | | | |
| • Use in combination with glucocorticoids | | | |
| • Avoid use in combination with baricitinib or tofacitinib | | | |
| • Required monitoring for infusion-related reactions and hypersensitivity/anaphylaxis during infusion and for 1 hour | | | |
| following infusion completion. | | | |
| • Closely monitor for signs/symptoms of infection during treatment. | | | |
| • If infusion-related reaction occurs, temporarily or permanently discontinue infusion (depending on the severity of the reaction and required interventions). | | | |
| • Postpone vaccination for at least 90 days after receipt of monoclonal antibody products used for the treatment of COVID-19. Postpone vaccination for at least 30 days after receipt of monoclonal antibodies used for post-exposure prophylaxis. | | | |
| prophyluxis. | | | |