

## Regimen Reference Order – SUPP – pamidronate

**Planned Course:** Every 4 weeks until disease progression or unacceptable toxicity

**Indications for Use:** Bone Metastases, Skeletal-Related Events, or Hypercalcemia of Malignancy

**CVAD:** At Provider's Discretion

**Proceed with treatment if:**

Corrected calcium is greater than 2.1 mmol/L

- ❖ Contact Physician if parameters not met

### SEQUENCE OF MEDICATION ADMINISTRATION

#### Pre-treatment Requirements

Drug	Dose	CCMB Administration Guideline
Not Applicable		

#### Treatment Regimen – SUPP - pamidronate

Establish primary solution 500 mL of: normal saline

Drug	Dose	CCMB Administration Guideline
pamidronate	90 mg	IV in normal saline 250 mL over 2 hours

Flush after each medication:

- 50 mL over 6 minutes (500 mL/hr)

**In the event of an infusion-related hypersensitivity reaction, refer to the 'Hypersensitivity Reaction Standing Order'**

### REQUIRED MONITORING

- Serum creatinine, calcium, albumin within 7 days prior to pamidronate as per physician order

#### Recommended Support Medications

Drug	Dose	CCMB Administration Guideline
Not Applicable		

### DISCHARGE INSTRUCTIONS

- Patient should advise dentist/hygienist that they are receiving pamidronate
- Ensure patient is given appointment for next dose

### ADDITIONAL INFORMATION

- Pamidronate is the preferred bisphosphonate for patients with creatinine clearance below 30 mL/minute. Consideration can be given to increasing the infusion time up to 4 hours and/or decreasing pamidronate dose in patients with renal dysfunction
- Pamidronate can cause osteonecrosis of the jaw