Pre-pheresis:

- 1. The Consult service (Neurology, Endocrinology, Rheumatology, Nephrology, etc.) requesting plasma exchange (PLEX) is responsible for the following:
 - a. Paging the Pheresis Service attending physician, present the case, and get approval for PLEX. During normal business hours, the Pheresis Service is covered by the Heme/Onc Consult attending physician; after hours, the service is covered by the Oncology Ward Service attending physician.
 - b. Establish the initial PLEX goals (exchange volume and number of days, specifying number of days and frequency, and anticipated duration). When these parameters have not yet been established, the exchange volume should be 1.0 with duration of three days. This information should be communicated to the Pheresis Service attending when presenting the case;
 - c. Get the patient to sign the informed consent for pheresis consent form (which is separate from the line placement consent form);
 - d. Communicate the treatment plan to the IM Team.
- 2. The IM Team to which the patient is assigned is responsible for:
 - a. Arranging for the placement of the pheresis catheter (a dedicated dialysis line);
 - b. Checking with the nursing unit where the patient is located that pheresis can be performed on that unit;
 - c. Calling the ANO office (ext 7-3170) and requesting a pheresis contractor be contacted to begin service.
 Note: the ANO office will not call the outside vendor until the line is placed and PLEX orders placed in ORCHID.
- 3. Placing the pheresis orders in ORCHID:
 - a. When pheresis is requested by any Consulting Division within the Dept of Medicine, the pheresis orders will be placed by the requesting Consult division; in all other settings (e.g., Department of Neurology, Surgery, OB/GYN), the pheresis orders will be placed by the Pheresis Service attending physician.

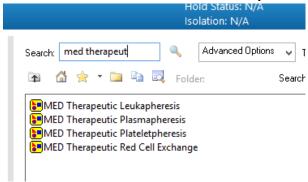
When setting up pheresis, the consulting service and IM team should recognize that owning to the multiple steps involved, and the reliance of an outside pheresis vendor with finite capacity, delays in initiating pheresis may be encountered. The consulting service and IM team should assess the appropriate time frame for commencing pheresis, based on the acuteness and severity of the condition being treated, and communicate expectations for the initiation of the service with the ANO.

Placing PLEX orders in ORCHID

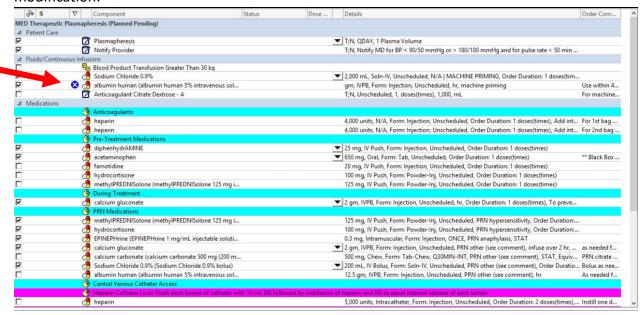
Prior to placing PLEX orders in ORCHID, calculate the patient's plasma volume, using an online calculator such as https://www.mdcalc.com/blood-volume-calculatio. For all non-hematological conditions, the replacement fluid will be **ALBUMIN 5% solution** and not FFP.

For the purposes of the example below, the plasma volume of 3500 mL will be used.

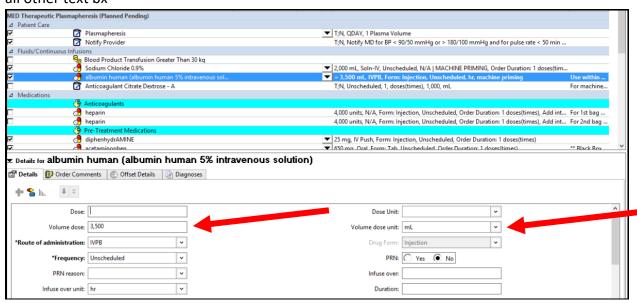
1. Place ORDER in ORCHID for **MED Therapeutic Plasmapheresis:**



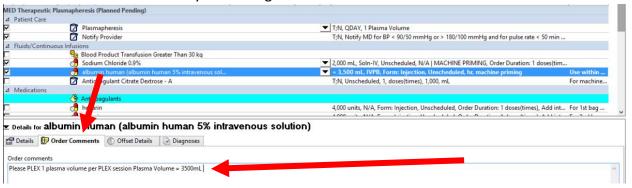
2. When the order is selected, the following screen opens up- only a few items require modification:



- 3. To modify Albumin human (albumin human 5% intravenous solution):
 - Enter patient's calculated plasma volume (example here uses 3500) and units (mL);
 all other text bx



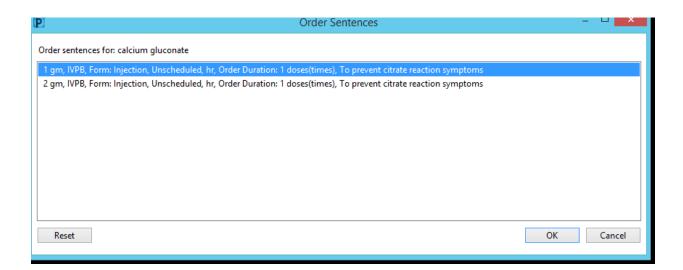
b. In **Comments** box enter number of plasma exchanges per PLEX session; assume 1.0 unless instructed otherwise by consulting service



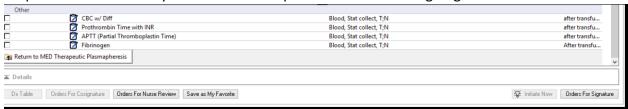
4. Modify Calcium gluconate order:



Select the "1 gm IVPB":



5. Request these laboratory studies be done q 12 hrs when PLEX ongoing:



6. Activate:

