

Rituximab Protocol

Indication:

- Relapsing remittent MS
- Neuromyelitis Optica
- Myasthenia Gravis
- CIDP
- Inflammatory myopathy
- Paraneoplastic neurological disorders

Screening labs:

- HCG (for women)
- Hepatitis B screen
- CBC with differential
- Creatinine, BUN
- CD19 flow cytometry

Pre-medicate patient with:

- Acetaminophen 650mg PO
- Benadryl 50mg IV
- Solumedrol 100mg IV

Administration:

Dose: 1000mg Rituximab (Rituxan) in 250ml of NS

First infusion: start at 50ml/h then increase by 50ml/hr every 30 minutes to target of 400mg/hr. Slow infusion if patient developed mild infusion reactions (nausea, flushing, mild hypotension), stop if patient developed severe infusion reactions (marked drop in BP, arrhythmia, chest pain).

Timing after starting infusion	Total dose given so far	Increase Infusion rate to
0 minute (start time)	0 mg	Start at 50mg/hr
30 minutes	25mg	100mg/hr
60 minutes	75mg	150mg/hr
1.5 hr	150mg	200mg/hr
2 hr	250mg	250mg/hr
2.5 hr	325mg	300mg/hr
3 hr	475mg	350mg/hr
3.5 hr	650mg	400mg/hr
4 hr	850mg	400mg/hr
4hr 22 minutes	1000mg	Stop

Next infusions: start at 100mg/hr and increase by 100mg/hr every one hour to target of 400mg/hr. Slow infusion if patient developed mild infusion reactions (nausea, flushing, mild hypotension), stop if patient developed severe infusion reactions (marked drop in BP, arrhythmia, chest pain).

Timing after starting infusion	Total dose given so far	Increase Infusion rate to
0 minute (start time)	0 mg	Start at 100mg/hr
30 minutes	50mg	200mg/hr
60 minutes	150mg	300mg/hr
1.5 hr	300mg	400mg/hr
2 hr	500mg	400mg/hr
2.5 hr	700mg	400mg/hr
3 hr	900mg	400mg/hr
3hr 15 minutes	1000mg	Stop

