

**PHYSICIAN'S ORDERS  
THERAPEUTIC PLASMA EXCHANGE (Adult)**

Allergies \_\_\_\_\_

**To complete the order form, fill in the required blanks and/or check the appropriate boxes.  
To delete orders, draw one line through the item and initial.**

**Demographics**

Patient weight: \_\_\_\_\_ kg

**Weigh the patient:** (Document on the Therapeutic Plasma Exchange Treatment Record)

Pre procedure

Post procedure

Vascular Access \_\_\_\_\_

**Non-Medication Orders**

Plasma Volume to be replaced: \_\_\_\_\_ mL

(Thrombotic Thrombocytopenic Purpura (TTP): 70 mL/kg, all other treatments: 50 mL/kg)

Plasma exchange frequency: \_\_\_\_\_

Total number of treatments required: \_\_\_\_\_

Vital signs: Measure vital signs pre and post procedure, q 15 to 30 min during procedure

Discharge or transfer patient if vital signs are stable, no bleeding from access and patient is asymptomatic

**Replacement fluid** (for blood products, complete separate Administration of Blood and Blood Products order):  
**Volume (mL)**

5% Albumin \_\_\_\_\_

Fresh Frozen Plasma (FFP) \_\_\_\_\_

Cryoprecipitate (CPP) \_\_\_\_\_

Normal Saline \_\_\_\_\_

Other: \_\_\_\_\_

(Replace 90% of plasma volume removed with 5% albumin and the rest with Normal Saline)

(For TTP: Replace 100% of plasma volume removed with CPP (use FFP if CPP not available))

**Labwork:**

Test	Pre	During	Post
CBC, Diff	✓		
Ionized calcium		If patient citrate toxic	✓
Lytes, Urea, Creatinine, Uric acid, Serum Viscosity, Immunoglobulin, Cryoglobulin			✓
LDH	✓ (for TTP)		
APLA (antiphospholipid antibodies) (1st Tx for TTP)	✓ (for TTP)		
Blood Cultures	✓ (for TTP)		
Other (specify)			
Other (specify)			
Other (specify)			

COMPLETE ADDITIONAL ORDERS ON PAGE TWO

Date: \_\_\_\_\_ Time: \_\_\_\_\_

\_\_\_\_\_ **MD SIGNATURE**



PHYSICIAN'S ORDERS  
THERAPEUTIC PLASMA EXCHANGE (Adult)

Allergies \_\_\_\_\_

To complete the order form, fill in the required blanks and/or check the appropriate boxes.  
To delete orders, draw one line through the item and initial.

Medication Orders:

Angiotensin Converting Enzyme Inhibitor (ACEI) held 24 hours prior to TPE:  yes OR  not applicable

Pre-TPE Medication Orders

- Diphenhydramine 50 mg IV x 1 dose
- Methylprednisolone sodium succinate (Solu-Medrol) 40 mg IV x 1 dose
- Dimenhydrinate 50 mg IV x 1 dose
- Acetaminophen 650 mg po x 1 dose

Anticoagulant Orders

Citrate Ratio

First treatment: Citrate Dextrose (ACD-A) anticoagulant A 1:15 ratio, then to be reassessed by physician  
(Consider 1:20 or 1:25 ratio for patients with severe TTP or at high risk of bleeding)

Calcium Gluconate 1 g IV in 100 mL NS starting rate \_\_\_\_\_ mL/hour (suggested: 30 to 50 mL/hour)  
Titrate to prevent/control citrate reaction (maximum 4 g per treatment or 1 g per hour)

Managing Complications During TPE:

For Hypotensive episodes:

Decrease blood flow rate and administer saline bolus - if continues notify physician  
Saline bolus: NS 200 mL IV push to maintain BP  
NS 250 mL to given for rinseback at end of TPE  
Other: \_\_\_\_\_

For Chest Pain and Arrhythmias:

Reduce blood flow  
Administer O2 at 2 to 4L/minute via NP  
Notify Physician STAT

For Temperature Greater than 38 degree Celsius

Blood cultures x 2 sets, 20 minutes apart  
Acetaminophen 650 mg po q4h orn  
Notify Physician

For Allergic Reaction

Dephenhydramine 25 to 50 mg IV x 1 during treatment (use 25 mg when SBP less than 110 mmHg)  
Notify Physician

Other Orders:

Date: \_\_\_\_\_ Time: \_\_\_\_\_

MD SIGNATURE \_\_\_\_\_

