Bamlanivimab / Etesevimab

For Treatment of Mild to Moderate COVID-19 Positive Adult and Pediatic Patients ≥12yo and ≥40kg

Bamlanivimab / Etesevimab is an investigational monoclonal antibody agent that the FDA Emergency Use Authorization (EUA) has permitted use for the treatment of mild to moderate COVID-19 in adults and pediatric patients with positive COVID results who are ≥12yo and ≥40kg, and who are at high risk for progressing to severe disease and/or hospitalization.
This is an outpatient therapy only.

Administration

- Infuse as a Basic Infusion with 2 RN verification (dual sign required)
- Infuse Bamlanivimab 700mg + Etesevimab 1400mg in 310ml IV over 60 minutes.
- For patients <50kg, infuse over 70 minutes.
- When infusion complete, flush line to ensure deliver of entire dose.

Monitoring

- Monitor VS immediately before infusion, q15min x 2, then q30min x 3.
- Call physician for SBP<90, HR<60, RR>35 or infusion reaction.
- Monitor for at least 1 hour following completion of infusion.

Infusion Reaction

If patient shows signs and symptoms, HOLD infusion and call physician.

Signs & Symptoms include:

- **Fever or chills**
- **Nausea**
- **Hypotension**
- **Tachycardia**
- **Asthenia**
- **Headache**
- **Rash**
- **Tongue and throat swelling**
- **Dyspnea.**

- Administer medications per emergency management protocol
- After symptoms have resolved and patient is stabilized, restart infusion at 50% of initial infusion rate and titrate up slowly.
- **DO NOT** exceed initial infusion rate.

Hypersensitivity/ Anaphylaxis Reaction

If patient shows signs and symptoms, DISCONTINUE infusion and call physician.

Signs & Symptoms include:

- **Airway compromise** (tongue or throat swelling, stridor, or hoarseness)
- **Breathing difficulties** (SOB, wheezing, cyanosis or respiratory arrest)
- **Circulatory compromise** (tachycardia, hypotension, myocardial ischemia or cardiac arrest)
- **Neurological changes** (confusion, agitation or loss of consciousness)
- **Skin and mucosal changes** (erythema, urticaria, or periorbital or facial edema)

- Administer medications per emergency management protocol.
- Disconnect the drug and **DO NOT** restart infusion.

If any reaction occurs, a RL Event report must be submitted.