PREVENTION AND TREATMENT OF TUMOUR LYSIS SYNDROME (TLS)
(Adopted with permission from the IWK)

Patient: _____

Age: _____   **Wt**: _____kg   **Date of Wt:** _____   **BSA**: _____m²

❑ Alert Record Reviewed   ❑ No Allergies Known

❑ Allergies-Adverse Reactions-Cautions: _____

DIAGNOSIS: _____
Items preceded by a bullet (●) are active orders. Items preceded by a checkbox (❑) are only actioned if checked (√)

For more information, refer to APPHON website for Guidelines for Management of TLS

MONITORING
- Twice daily weights
- Vitals Signs q4h
- Monitor for signs of hyperkalemia; hyperphosphatemia; hypocalcemia; renal failure

INVESTIGATIONS
- CBC + Diff; every _____ hours (minimum of daily) for the first 3 days, then reassess
- Na, K, CREAT, BUN, venous blood gas, phosphate, calcium, ionized calcium every _____ hours for the first 3 days, then reassess
- ❑ uric acid ❑ rasburicase (URICRAS) every ❑ 8 hours ❑ 12 hours for the first 3 days, then reassess
- ❑ Urine specific gravity, each void for the first ____ days, then reassess

FLUIDS (Do NOT add potassium to hydration)
For patients at:

❑ Low risk of TLS: D5W + 0.9% NaCl IV/PO   _____mL/h (65- 100 mL/m²/hour) reassess daily
❑ High Risk of TLS: D5W + 0.9% NaCl IV/PO   _____mL/h (100-125 mL/m²/hour) reassess daily

MEDICATIONS (*See reverse for guidance on the use of medications*)
❑ Allopurinol
❑ Less than 10 kg: (3.3 mg/kg/dose) _____ mg PO TID
❑ Greater than or equal to 10 kg: (300-450 mg/m²/day DIVIDED BID or TID, max 400 mg/day)
   Note: Allopurinol is available as 20 mg/mL suspension or 100 mg tablets _____ mg PO ❑ BID ❑TID

❑ Rasburicase (**DO NOT GIVE** rasburicase if known G6PD deficiency)
❑ Less than 15 kg: 1.5 mg IV x 1 dose, then reassess
❑ 15 to 25 kg: 3 mg IV x 1 dose, then reassess
❑ 26 to 35 kg: 4.5 mg IV x 1 dose, then reassess
❑ over 35 kg: 6 mg IV x 1 dose, then reassess

_____ _____   _____   _____

DATE (dd/mm/yyyy)   Time (24hr/hh:mm)   Prescriber Signature   Printed Surname/Registration#

_____ _____   _____   _____

DATE (dd/mm/yyyy)   Time (24hr/hh:mm)   Verified By (Signature)   Printed Surname