

# System of Operations for the Identification and Training of Patients to Self-Administer Romiplostim for Immune Thrombocytopenia (ITP)

## Network Guidance Document

Kent & Medway Cancer Collaborative

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## 1.0 INTRODUCTION

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ITP is an acquired autoimmune disorder characterised by a low platelet count resulting from platelet destruction and impaired platelet production. Romiplostim is a thrombopoietin receptor agonist indicated for adult primary ITP and is administered once weekly as subcutaneous injection. Patients who have a stable platelet count  $\geq 50 \times 10^9/L$  for at least 4 weeks without dose adjustment may, at the discretion of the supervising physician, self-administer Romiplostim solution for injection at home. Patients eligible for self-administration of Romiplostim should be trained in these procedures.

## 2.0 PROCESS

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- Identify patients who have ITP
- Identify stable patients with a platelet count of  $\geq 50 \times 10^9/L$  for a least 4 weeks without dose adjustment.
- All patients should be classed as able to self-administer unless proven otherwise. Consider if a family member can give the injection
- Patients must be willing to engage in the process of learning to self-administer.
- Haematology Consultant to amend electronic action sheet (EAS) to alert staff to commence training.
- Schedulers book appointments to include training and administration on the chemotherapy unit.
- Patients interested in self-administration will undergo a period of training. They will be required to demonstrate their ability to self-administer before beginning self-administration.
- Patient education: this includes side effects of treatment and storage of Romiplostim.
- After 4 weeks of direct supervised self-administration, only patients who demonstrate the ability to reconstitute and self-administer Romiplostim are allowed to continue to do so.
- Nurse to amend EAS to confirm patient will be self-administering at home.
- Schedulers to book weekly Haematology nurse led clinic appointments to monitor and act on blood results.
- Pharmacy will contact the patient to collect a 4 weekly supply of Romiplostim and also provide a sharps bin.
- Patients must have a contact number that they can access for support (office hours).

### 3.0 SUMMARY OF THE STEPS

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- STEP 1:** Identify suitable adult ITP patients
- STEP 2:** Give patients information about Romiplostim and self-administration
- STEP 3:** Nurse demonstrate the process of reconstituting and administering Romiplostim
- STEP 4:** Send the patient home with a demonstration pack to practice at home
- STEP 5:** Patient/carer prepares and administers Romiplostim under direct supervision of the nurse
- STEP 6:** Assess the patient's confidence to self-administer and continue training if necessary
- STEP 7:** Give the patient a month's supply of Romiplostim to take home
- STEP 8:** Continue blood monitoring weekly.
- STEP 9:** Haematology Clinical Nurse Specialist to check blood results weekly and act on findings.
- STEP 10:** Team to monitor blood results and prescribe Romiplostim monthly

The above the steps should be used with Amgen Best Practice Guideline (June 2021).

### 4.0 REFERENCES

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GB-NPL-0221-00010  
Nplate - Self Admin B



GB-NPL-1120-00003  
Durham & Darlington



## 5.0 DOCUMENT ADMINISTRATION

<b>Document Title</b>	System of Operations for the identification and training of patients to self-administer Romiplostim for immune Thrombocytopenia (ITP)
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<b>Revision History</b>			
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