BLINATUMOMAB

INDICATION

- **NICE TA450 (BLUETEQ required)**

Treatment of adult patients with Philadelphia chromosome negative relapsed or refractory B-precursor acute lymphoblastic leukaemia (ALL), if

- previously treated with intensive combination chemotherapy as initial treatment with or without subsequent salvage therapy, AND
- patient has a performance status of 0-2

- **NICE TA589 (BLUETEQ required)**

Treatment of adult patients with Philadelphia chromosome negative CD19 positive B-precursor ALL in first complete remission with **minimal residual disease** (MRD) greater than or equal to 0.1%.

TREATMENT INTENT

Curative

PRE-ASSESSMENT

1. Ensure histology is confirmed prior to administration of chemotherapy and document in notes.
2. Record stage of the disease including results of bone marrow aspirate/biopsy (for morphological and MRD assessment)
3. Blood tests - FBC, U&Es, LDH, urate, calcium, magnesium, creatinine, LFTs, glucose, hepatitis B core antibody and hepatitis BsAg, hepatitis C antibody, HIV after consent.
4. Send a "group and save" sample to transfusion.
5. Central venous access should be used.
6. Urine pregnancy test - before cycle 1 of each new chemotherapy course in women aged
   12 - 55 years of age unless they have been sterilised or undergone a hysterectomy.
7. ECG +/- Echo - *if clinically indicated.*
8. Record performance status (WHO/ECOG).
9. Record height and weight.
10. Consent - ensure patient has received adequate verbal and written information regarding their disease, treatment and potential side effects. Document in medical notes all information that has been given. Obtain written consent prior to treatment.
11. Fertility - it is very important the patient understands the potential risk of reduced fertility.
    All patients should be offered fertility advice (see fertility guidelines).
12. Hydration - fluid intake should be at least 3 litres per day. This does not necessarily need to be intravenous.
13. Consider dental assessment / Advise dental check is carried out by patient's own dental practitioner before treatment starts.
14. Perform neurological examination prior to starting therapy and whilst on therapy.

15. For the treatment of relapsed or refractory B-precursor ALL, admit patients for a minimum the first 9 days of the first cycle and the first 2 days of the second cycle.
16. For the treatment of Philadelphia chromosome negative MRD positive B-precursor ALL, admit patients for a minimum the first 3 days of the first cycle and the first 2 days of subsequent cycles.
17. In patients with a history or presence of clinically relevant CNS pathology, hospitalisation is recommended for the minimum 14 days of the first cycle and the first 2 days of the second cycle. Caution should be exercised as cases of late occurrence of first neurological events in the second cycle have been observed.

DRUG REGIMEN

Recommended daily dose is by patient weight.

- **Relapsed or refractory B-precursor acute lymphoblastic leukaemia (ALL) indication**

CYCLE 1

Day 1	**Pre-meds:**	Dexamethasone 20mg IV bolus 1 hour before infusion Paracetamol 1g PO QDS for 48 hours
Days 1 to 7	**BLINATUMOMAB** 9micrograms/day* continuous IV infusion over 7 days	
Days 8 to 28	**BLINATUMOMAB** 28micrograms/day** continuous IV infusion over 21 days	

CYCLES 2 to 5

Day 1	**Pre-meds:**	Dexamethasone 20mg IV bolus 1 hour before infusion Paracetamol 1g PO QDS for 48 hours
Days 1 to 28	**BLINATUMOMAB** 28micrograms/day** continuous IV infusion over 28 days	

- **MRD Indication**

CYCLES 1 to 4

Day 1	**Pre-meds:**	Dexamethasone 20mg IV bolus 1 hour before infusion Paracetamol 1g PO QDS for 48 hours
Days 1 to 28	**BLINATUMOMAB** 28micrograms/day** continuous IV infusion over 28 days	

* Patients greater than or equal to 45 kg receive a fixed-dose and for patients less than 45 kg, the dose is calculated using the patient's body surface area (BSA) at 5 micrograms/m^2/day (not exceeding 9 micrograms/day).

** Patients greater than or equal to 45 kg receive a fixed-dose and for patients less than 45 kg, the dose is calculated using the patient's body surface area (BSA) at 15 micrograms/m^2/day (not exceeding 28 micrograms/day).

INTRATHECAL prophylaxis

Recommended before and during therapy to prevent central nervous system ALL relapse.

PRE-PHASE STEROIDS For Patients with High Tumour Burden

For patients with ≥ 50% leukaemic blasts in bone marrow or > 15,000/microlitre peripheral blood leukaemic blast counts treat with pre-phase dexamethasone (10mg/m^2/day up to a maximum of 24 mg/day).

CYCLE FREQUENCY / RESTAGING

Cycles repeat every **6 weeks** (4 weeks of continuous intravenous infusion followed by 2 week treatment-free interval).

- **Relapsed or refractory B-precursor acute lymphoblastic leukaemia (ALL) indication**

  Patients will receive initially 2 cycles of treatment. Patients who have achieved complete remission (CR/CRh*) after 2 treatment cycles may receive up to 3 additional consolidation cycles, based on an individual benefits-risks assessment (maximum 5 cycles).

- **MRD Indication**

  Patients may receive 1 cycle of induction treatment followed by up to 3 additional consolidation cycles, based on an individual benefits-risks assessment (maximum 4 cycles).

ADMINISTRATION, SCHEDULES AND INFUSION RATES

Blinatumomab is compatible with polyolefin, PVC non-di-ethylhexylphthalate (non-DEHP), or ethyl vinyl acetate (EVA) infusion bags/pump cassettes. Administer using programmable, lockable and alarmed CADD pumps and using intravenous tubing that contains a sterile, non-pyrogenic, low protein-binding 0.2 micrometre in-line filter. Monitor for infusion reactions.

Note: The entire volume of the infusion bag / CADD cassette will be more than the volume to be administered to the patient (240 mL). This is to account for intravenous infusion line loss.

Method of administration	Total volume	Requires Bag Spike Set	Blinatumomab dose and infusion rates on ARIA		Preferred setting
INFUSION BAGS	265 to 275mL	Yes	Schedule 1 or 2 (Infusion bags)	**Appendix 1 and 2**	Inpatients
CADD cassettes (reservoirs)	250mL	No	Schedule 1 or 2 (CADD cassettes)	**Appendix 3 and 4**	Outpatient Ambulatory

OUTPATIENT / AMBULATORY 250mL CADD CASETTE or RESERVOIR (250m: fixed volume)

Note this practice is based on the Australian product label and is considered outside of the scope of the UK license.

CADD (Continuous Ambulatory Delivery Device) pre-filled cassettes (also known as reservoirs) may be requested from pharmacy or external aseptic unit for use with CADD pumps. Use of a CADD pre-filled reservoir is often associated with reduced problems with air in the line detection and improved patient drug safety at home through avoidance of a spiked infusion bag.

Reservoirs are fixed to 250mL volume. These will need prepared by pharmacy and will need prescribed with a dose modification to the standard Schedule 1 or Schedule 2 as set up on ARIA:

SCHEDULING TIPS:

- Ensure the schedule prescribed corresponds to the booked attendance schedules for bag change as outlined below. Pay particular attention to Bank Holidays.
- Patients should be scheduled for starting treatment and for subsequent bag changes in the mornings.
- Patient should stick with the same schedule for the duration of treatment. If a schedule change is required must ensure the new corresponding schedule is re-prescribed correctly ensuring the prescription is set at the correct cycle number and correct dose.
- Schedule bag change at the same time on each day.
- The bag change must occur within 4 hours of the designated time regardless of the remaining volume in the existing infusion bag.
- Infusion bag has a 96 hours expiry at room temperature. Do not run infusion bag beyond 96 hours from being at room temperature.

STANDARD SCHEDULES	Infusion duration	Use this schedule if DAY 1 is either on
Schedule 1 (Infusion Bags) Schedule 1 (CADD cassettes)	4 Days THEN 3 Days	MONDAY, THURSDAY or FRIDAY
Schedule 2 (Infusion Bags) Schedule 2 (CADD cassettes)	3 Days THEN 4 Days	MONDAY, TUESDAY or FRIDAY

EXCEPTIONAL SCHEDULES

- Patients should stick with the same schedule for the duration of treatment as outlined above in the ADMINISTRATION, SCHEDULES AND INFUSION RATES section and APPENDIXES.

- In exceptional unanticipated circumstances where a change from the original schedule is needed (i.e. dose interruptions, patient circumstances etc.) including when a 1 or 2 days infusions are required, the following exceptional schedules and dosing options are available on the electronic prescribing system. This must be discussed with the consultant.

- If exceptional schedules are used, it is critical that the right dosing and duration are prescribed and the cycle is not continued beyond a total of 28 days of infusion. Care when prescribing! This must be discussed with the consultant.

- Consideration should also be given to the total number of vials required and stock management. Liaise with a pharmacist.

- See **Appendix 5** for further information.

DOSE INTERRUPTIONS AND MODIFICATIONS

Interruptions

If treatment is interrupted for:

- **≥4 hours,** supervision by a healthcare professional or hospitalisation is recommended
- **≤ 7 days**: continue the same cycle to a total of 28 days of infusion including days before and after the interruption in that cycle
- **>7 and ≤ 14 days**: start a new cycle
- **>14 days**: discontinue treatment permanently, except if described differently in the table below

Dose modifications

Grade*	Toxicity and Action
4	Discontinue treatment permanently for any Grade 4 cytokine release syndrome, tumour lysis syndrome or neurological toxicity. Consider discontinuing treatment permanently for any other Grade 4 toxicity (including elevated LFTs) or adverse reaction.
3	**Neurological toxicity** • Interrupt infusion until ≤ grade 1 (mild) and for at least 3 days, and then restart at 9mcg/day. Escalate to 28mcg/day after 7 days if the toxicity does not recur. • On re-initiation, pre-medicate with a 24 mg dose of dexamethasone. Then reduce dexamethasone step-wise over 4 days. • If the toxicity occurred at 9mcg/day, or if the toxicity takes more than 7 days to resolve, discontinue treatment permanently. • In case of convulsion, discontinue treatment permanently if more than one convulsion occurs. In the event of a seizure, secondary prophylaxis with appropriate anticonvulsant (e.g. levetiracetam) is recommended. **Cytokine release syndrome, Tumour lysis syndrome** Interrupt infusion until resolved, then restart at 9 mcg/day. Escalate to 28mcg/day after 7 days if the toxicity does not recur. **Elevated LFTs** If clinically relevant, Interrupt treatment until ≤ grade 1 (mild), then restart at 9mcg/day. Escalate to 28mcg/day after 7 days if the toxicity does not recur. **Other Grade 3 toxicities** Interrupt treatment until ≤ grade 1 (mild), and then restart at 9mcg/day. Escalate to 28mcg/day after 7 days if the toxicity does not recur.

*Based on the NCI Common Terminology Criteria for Adverse Events (CTCAE) version 5.0

DOSING ERRORS

Dosing errors have been observed with Blinatumomab treatment. It is very important that the instructions for administration are strictly followed to minimise errors. In case of errors in dosing, the consultant must be informed.

INVESTIGATIONS

- FBC, Coagulation screen.
- U&E, LFT.
- Recent bone marrow assessment
- Clinical monitoring for signs and symptoms of neurologic events. This should include a weekly "writing test" where patient writes a simple sentence in their medical records (this can be patient held if required).

CONCURRENT MEDICATION

Drug	Dose and duration
Allopurinol	300 mg daily for 7 days starting 24-48 hours prior to chemotherapy (first course / cycle only)
Aciclovir	200 mg three times a day for duration of treatment and for 3 months after completion
Co-trimoxazole	480 mg daily on Mondays, Wednesdays, Fridays each week
Fluconazole	50 mg daily for duration of chemotherapy

ANTI-EMETICS

Minimal emetic risk

ADVERSE EFFECTS / REGIMEN SPECIFIC COMPLICATIONS

Refer to the Summary of Product Characteristics for full and further details on adverse effects.

Neurologic events

In the pivotal study 62.2% of patients experienced one or more neurologic adverse reactions (including psychiatric disorders). Grade 3 or higher neurologic events following initiation of blinatumomab administration included encephalopathy, seizures, speech disorders, disturbances in consciousness, confusion and disorientation, and coordination and balance disorders.
The median time from initiation of blinatumomab to onset of a neurologic event was 9 days. The majority of events resolved after treatment interruption.

It is recommended that a neurological examination be performed in patients prior to starting therapy and that patients be clinically monitored for signs and symptoms of neurologic events (e.g. writing test). Management of these signs and symptoms to resolution may

require either temporary interruption or permanent discontinuation of treatment. Elderly patients experience a higher rate of neurological events. Counsel patients on the potential neurologic effects and advise patients not to drive, use heavy machinery, or engage in hazardous activities while on treatment and to promptly report any neurological symptoms.

Infections

Life-threatening or fatal (grade ≥ 4) viral, bacterial and fungal infections have been reported. n addition, reactivations of virus infection (e.g. Polyoma (BK)) have been observed in the phase II clinical study in adults with Philadelphia chromosome negative relapsed or refractory B-precursor ALL. Patients with Philadelphia chromosome negative relapsed or refractory B-precursor ALL with ECOG performance status at baseline of 2 experienced a higher incidence of serious infections compared to patients with ECOG performance status of < 2.

Infusion reactions

Including rash, wheezing, flushing, breathlessness, hypotension, face swelling generally occurring within 48 hours after initiating infusion. Delayed onset of infusion reactions or in later cycles has also been reported. Patients should be observed closely for infusion reactions, especially during the initiation of the first and second treatment cycles and treated appropriately. Anti-pyretic use (e.g. paracetamol) is recommended to help reduce pyrexia during the first 48 hours of each cycle. Reactions may be clinically indistinguishable from signs and symptoms of cytokine release syndrome.

Cytokine release syndrome, Tumour lysis syndrome and Elevated liver enzymes.

Others: Infections, pyrexia, neutropenia and febrile neutropenia, headaches, peripheral oedema, hypokalaemia, constipation, anaemia, cough, tremor, abdominal pain, insomnia fatigue and chills, leukoencephalopathy including progressive multifocal leukoencephalopathy.

DRUG INTERACTIONS

No formal drug interaction studies have been performed. In vitro studies suggest that blinatumomab did not affect CYP450.

Initiation of blinatumomab treatment causes transient release of cytokines during the first days of treatment that may suppress CYP450 enzymes. Patients who taking CYP450 and transporter substrates with a narrow therapeutic index should be monitored for adverse effects (e.g. warfarin) or drug concentrations (e.g. ciclosporin) during this time. The dose of the concomitant medicinal product should be adjusted as needed.

TREATMENT RELATED MORTALITY

Less than 5%

REFERENCES

1. NICE TA 450. Blinatumomab for previously treated Philadelphia-chromosome-negative acute lymphoblastic leukaemia. Published: 28/6/2017. Available from: https://www.nice.org.uk/guidance/TA450
2. NICE TA 589. Blinatumomab for treating acute lymphoblastic leukaemia in remission with minimal residual disease activity. Published: 24/7/2019. Available from: https://www.nice.org.uk/guidance/TA589
3. Amgen UK. Blinatumomab (Blincyto®) Summary of Product Characteristics. Updated: 18/10/2021. Accessed on 8/11/2021 via https://www.medicines.org.uk/emc/product/5064/smpc
4. Amgen Australia. Blinatumomab (Blincyto®) Summary of Product Characteristics. Updated: 12/3/2021. Accessed on 8/11/2021 via: http://www.guildlink.com.au/gc/ws/amgen/pi.cfm?product=anpblinp11115
5. National Institute of Health, National Cancer Institute. Common Terminology Criteria for Adverse Events (CTCAE) version v5.0: November 27, 2017. Available online from https://ctep.cancer.gov/protocoldevelopment/electronic_applications/docs/CTCAE_v5_Quick_Reference_5x7.pdf

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REVIEW

Name	Revision	Date	Version	Review date
Nadjoua Maouche Pharmacist	SmPC correction and protocol update	May 2016	1.1	May 2018
Manuela Sultanova Service Coordinator	General formatting	July 2016	1.2	May 2018
Nadjoua Maouche Pharmacist	Scheduling tips. Schedule tables. Dosing Errors. Exceptional schedules.	October 2016	1.3	May 2018
Cheuk-kie Cheung Pharmacist	Formatting	March 2017	1.4	March 2019
Cheuk-kie Cheung Pharmacist	Update of CDF funding	May 2017	1.5	March 2019
Cheuk-kie Cheung Pharmacist	Update of NICE funding	July 2017	1.6	March 2019
Jon Barrett Haematology Pharmacist NSSG Myeloid Group	Update of MRD Indication Annual Protocol meeting	October 2019	1.7	October 2021
Natalia Czub Donna Constantine Yen Lim Haematology Pharmacists NSSG Myeloid Group	Added BSA-based dosing (for patients < 45kg). Added CADD cassettes dosing for use in ambulatory care. Appendixes included, references updated. Annual protocol meeting	November 2021	2.0	November 2023

APPENDIX 1 **STANDARD SCHEDULES**

INFUSION BAGS (Fixed-dosing for patients ≥ 45kg)

SCHEDULE 1	**4 DAYS, then 3 DAYS Infusion**
	DAY 1 is either on a MONDAY, THURSDAY or FRIDAY

Bag duration	**Daily dose**	**BLINATUMOMAB dose, infusion duration and rate**
96 hours	9mcg/day	**41.25** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
72 hours	9mcg/day	**31.25** micrograms in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
96 hours	28mcg/day	**133.75** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
72 hours	28mcg/day	**100** micrograms in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**

SCHEDULE 2	**3 DAYS, then 4 DAYS Infusion**
	DAY 1 is either on a MONDAY, TUESDAY or FRIDAY

Bag duration	**Daily dose**	**BLINATUMOMAB dose, infusion duration and rate**
72 hours	9mcg/day	**31.25 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
96 hours	9mcg/day	**41.25** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
72 hours	28mcg/day	**100** micrograms in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
96 hours	28mcg/day	**133.75** micrograms in sodium chloride 0.9* infused over **96 hours** at a rate of **2.5mL/hr**

APPENDIX 2 **STANDARD SCHEDULES**

INFUSION BAGS (BSA-based dosing for patients < 45kg)

SCHEDULE 1	4 DAYS, then 3 DAYS Infusion
	DAY 1 is either on a MONDAY, THURSDAY or FRIDAY

Bag duration	Daily dose	BSA (m^2)	BLINATUMOMAB dose, infusion duration and rate
96 hours	5 mcg/m^2/day	1.5 – 1.59	**35** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
		1.4 – 1.49	**32.5** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
		1.3 – 1.39	**30** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
		1.2 – 1.29	**28.75** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
		1.1 – 1.19	**26.25** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
		1 – 1.09	**23.75** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
		0.9 – 0.99	**21.25** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
		0.8 – 0.88	**18.75** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
		0.7 – 0.79	**16.25** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
		0.6 – 0.69	**15** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
		0.5 – 0.59	**12.125** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
		0.4 – 0.49	**9.375** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
72 hours	5 mcg/m^2/day	1.5 – 1.59	**26.25 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		1.4 – 1.49	**25 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		1.3 – 1.39	**22.5 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		1.2 – 1.29	**21.25 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		1.1 – 1.19	**20 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		1 – 1.09	**17.5 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		0.9 – 0.99	**16.25 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		0.8 – 0.88	**13.75 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		0.7 – 0.79	**12.5 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		0.6 – 0.69	**10.75 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		0.5 – 0.59	**9 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		0.4 – 0.49	**7.375 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**

APPENDIX 2 **STANDARD SCHEDULES**

INFUSIONS BAGS (BSA-based dosing for patients < 45kg)

SCHEDULE 1	4 DAYS, then 3 DAYS Infusion
	DAY 1 is either on a MONDAY, THURSDAY or FRIDAY

Bag duration	Daily dose	BSA (m^2)	BLINATUMOMAB dose, infusion duration and rate
96 hours	15 mcg/m^2/day	1.5 – 1.59	**105** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5ml/hr**
		1.4 – 1.49	**98.75** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5ml/hr**
		1.3 – 1.39	**91.25** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5ml/hr**
		1.2 – 1.29	**85** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5ml/hr**
		1.1 – 1.19	**77.5** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5ml/hr**
		1 – 1.09	**71.25** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5ml/hr**
		0.9 – 0.99	**63.75** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5ml/hr**
		0.8 – 0.88	**57.5** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5ml/hr**
		0.7 – 0.79	**50** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5ml/hr**
		0.6 – 0.69	**42.5** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5ml/hr**
		0.5 – 0.59	**36.25** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5ml/hr**
		0.4 – 0.49	**28.75** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5ml/hr**
72 hours	15 mcg/m^2/day	1.5 – 1.59	**78.75 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		1.4 – 1.49	**73.75 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		1.3 – 1.39	**68.75 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		1.2 – 1.29	**63.75 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		1.1 – 1.19	**58.75 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		1 – 1.09	**52.5 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		0.9 – 0.99	**47.5 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		0.8 – 0.88	**42.5 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		0.7 – 0.79	**37.5 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		0.6 – 0.69	**32.5 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		0.5 – 0.59	**27.5 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		0.4 – 0.49	**22.5 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**

APPENDIX 2 **STANDARD SCHEDULES**

INFUSIONS BAGS (BSA-based dosing for patients < 45kg)

SCHEDULE 2	**3 DAYS, then 4 DAYS Infusion**
	DAY 1 is either on a MONDAY, TUESDAY or FRIDAY

Bag duration	**Daily dose**	**BSA (m^2)**	**BLINATUMOMAB dose, infusion duration and rate**
72 hours	5 mcg/m^2/day	1.5 – 1.59	**26.25 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		1.4 – 1.49	**25 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		1.3 – 1.39	**22.5 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		1.2 – 1.29	**21.25 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		1.1 – 1.19	**20 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		1 – 1.09	**17.5 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		0.9 – 0.99	**16.25 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		0.8 – 0.88	**13.75 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		0.7 – 0.79	**12.5 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		0.6 – 0.69	**10.75 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		0.5 – 0.59	**9 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		0.4 – 0.49	**7.375 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
96 hours	5 mcg/m^2/day	1.5 – 1.59	**35** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
		1.4 – 1.49	**32.5** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
		1.3 – 1.39	**30** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
		1.2 – 1.29	**28.75** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
		1.1 – 1.19	**26.25** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
		1 – 1.09	**23.75** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
		0.9 – 0.99	**21.25** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
		0.8 – 0.88	**18.75** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
		0.7 – 0.79	**16.25** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
		0.6 – 0.69	**15** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
		0.5 – 0.59	**12.125** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5ml/hr**
		0.4 – 0.49	**9.375** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**

APPENDIX 2 **STANDARD SCHEDULES**

INFUSIONS BAGS (BSA-based dosing for patients < 45kg)

SCHEDULE 2	3 DAYS, then 4 DAYS Infusion
	DAY 1 is either on a MONDAY, TUESDAY or FRIDAY

Bag duration	Daily dose	BSA (m^2)	BLINATUMOMAB dose, infusion duration and rate
72 hours	15 mcg/m^2/day	1.5 – 1.59	**78.75 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		1.4 – 1.49	**73.75 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		1.3 – 1.39	**68.75 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		1.2 – 1.29	**63.75 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		1.1 – 1.19	**58.75 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		1 – 1.09	**52.5 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		0.9 – 0.99	**47.5 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		0.8 – 0.88	**42.5 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		0.7 – 0.79	**37.5 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		0.6 – 0.69	**32.5 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		0.5 – 0.59	**27.5 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
		0.4 – 0.49	**22.5 micrograms** in sodium chloride 0.9% infused over **72 hours** at a rate of **3.3 mL/hr**
96 hours	15 mcg/m^2/day	1.5 – 1.59	**105** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
		1.4 – 1.49	**98.75** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
		1.3 – 1.39	**91.25** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
		1.2 – 1.29	**85** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
		1.1 – 1.19	**77.5** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
		1 – 1.09	**71.25** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
		0.9 – 0.99	**63.75** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
		0.8 – 0.88	**57.5** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
		0.7 – 0.79	**50** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
		0.6 – 0.69	**42.5** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
		0.5 – 0.59	**36.25** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**
		0.4 – 0.49	**28.75** micrograms in sodium chloride 0.9% infused over **96 hours** at a rate of **2.5mL/hr**

APPENDIX 3 **STANDARD SCHEDULES**

CADD cassettes (Fixed-dosing for patients ≥ 45kg)

SCHEDULE 1	4 DAYS, then 3 DAYS Infusion
	DAY 1 is either on a MONDAY, THURSDAY or FRIDAY

Bag duration	Daily dose	BLINATUMOMAB dose, infusion duration and rate
96 hours	9mcg/day	**37.5** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
72 hours	9mcg/day	**28.125 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
96 hours	28mcg/day	**116.25** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
72 hours	28mcg/day	**87.5** micrograms in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**

SCHEDULE 2	3 DAYS, then 4 DAYS Infusion
	DAY 1 is either on a MONDAY, TUESDAY or FRIDAY

Bag duration	Daily dose	BLINATUMOMAB dose, infusion duration and rate
72 hours	9mcg/day	**28.125 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
96 hours	9mcg/day	**37.5** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
72 hours	28mcg/day	**87.5** micrograms in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
96 hours	28mcg/day	**116.25** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**

APPENDIX 4 **STANDARD SCHEDULES**

CADD cassettes (BSA-based dosing for patients < 45kg)

SCHEDULE 1	4 DAYS, then 3 DAYS Infusion
	DAY 1 is either on a MONDAY, THURSDAY or FRIDAY

Bag duration	Daily dose	BSA (m^2)	BLINATUMOMAB dose, infusion duration and rate
96 hours	5 mcg/m^2/day	1.5 – 1.59	**32.5** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		1.4 – 1.49	**30** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		1.3 – 1.39	**27.5** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		1.2 – 1.29	**26.25** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		1.1 – 1.19	**23.75** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		1 – 1.09	**21.25** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		0.9 – 0.99	**20** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		0.8 – 0.88	**17.5** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		0.7 – 0.79	**15** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		0.6 – 0.69	**13.75** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		0.5 – 0.59	**11.25** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		0.4 – 0.49	**9.25** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
72 hours	5 mcg/m^2/day	1.5 – 1.59	**23.75 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		1.4 – 1.49	**22.5 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		1.3 – 1.39	**21.25 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		1.2 – 1.29	**20 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		1.1 – 1.19	**17.5 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		1 – 1.09	**16.25 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		0.9 – 0.99	**15 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		0.8 – 0.88	**13.75 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		0.7 – 0.79	**11.625 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		0.6 – 0.69	**10.125 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		0.5 – 0.59	**8.5 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		0.4 – 0.49	**7 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**

APPENDIX 4 **STANDARD SCHEDULES**

CADD cassettes (BSA-based dosing for patients < 45kg)

SCHEDULE 1	4 DAYS, then 3 DAYS Infusion
	DAY 1 is either on a MONDAY, THURSDAY or FRIDAY

Bag duration	Daily dose	BSA (m^2)	BLINATUMOMAB dose, infusion duration and rate
96 hours	15 mcg/m^2/day	1.5 – 1.59	**96.25** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		1.4 – 1.49	**90** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		1.3 – 1.39	**83.75** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		1.2 – 1.29	**77.5** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		1.1 – 1.19	**71.25** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		1 – 1.09	**65** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		0.9 – 0.99	**58.75** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		0.8 – 0.88	**52.5** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		0.7 – 0.79	**46.25** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		0.6 – 0.69	**40** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		0.5 – 0.59	**33.75** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		0.4 – 0.49	**27.5** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
72 hours	15 mcg/m^2/day	1.5 – 1.59	**72.5 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		1.4 – 1.49	**67.5 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		1.3 – 1.39	**62.5 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		1.2 – 1.29	**58.75 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		1.1 – 1.19	**53.75 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		1 – 1.09	**48.75 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		0.9 – 0.99	**43.75 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		0.8 – 0.88	**40 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		0.7 – 0.79	**35 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		0.6 – 0.69	**30 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		0.5 – 0.59	**25 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		0.4 – 0.49	**21.25 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**

APPENDIX 4 **STANDARD SCHEDULES**

CADD cassettes (BSA-based dosing for patients < 45kg)

SCHEDULE 2	3 DAYS, then 4 DAYS Infusion
	DAY 1 is either on a MONDAY, TUESDAY or FRIDAY

Bag duration	Daily dose	BSA (m^2)	BLINATUMOMAB dose, infusion duration and rate
72 hours	5 mcg/m^2/day	1.5 – 1.59	**23.75 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		1.4 – 1.49	**22.5 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		1.3 – 1.39	**21.25 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		1.2 – 1.29	**20 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		1.1 – 1.19	**17.5 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		1 – 1.09	**16.25 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		0.9 – 0.99	**15 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		0.8 – 0.88	**13.75 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		0.7 – 0.79	**11.625 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		0.6 – 0.69	**10.125 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		0.5 – 0.59	**8.5 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		0.4 – 0.49	**7 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
96 hours	5 mcg/m^2/day	1.5 – 1.59	**32.5** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		1.4 – 1.49	**30** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		1.3 – 1.39	**27.5** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		1.2 – 1.29	**26.25** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		1.1 – 1.19	**23.75** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		1 – 1.09	**21.25** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		0.9 – 0.99	**20** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		0.8 – 0.88	**17.5** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		0.7 – 0.79	**15** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		0.6 – 0.69	**13.75** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		0.5 – 0.59	**11.25** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		0.4 – 0.49	**9.25** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**

APPENDIX 4 **STANDARD SCHEDULES**

CADD cassettes (BSA-based dosing for patients < 45kg)

SCHEDULE 2	3 DAYS, then 4 DAYS Infusion
	DAY 1 is either on a MONDAY, TUESDAY or FRIDAY

Bag duration	Daily dose	BSA (m^2)	BLINATUMOMAB dose, infusion duration and rate
72 hours	15 mcg/m^2/day	1.5 – 1.59	**72.5 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		1.4 – 1.49	**67.5 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		1.3 – 1.39	**62.5 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		1.2 – 1.29	**58.75 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		1.1 – 1.19	**53.75 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		1 – 1.09	**48.75 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		0.9 – 0.99	**43.75 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		0.8 – 0.88	**40 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		0.7 – 0.79	**35 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		0.6 – 0.69	**30 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		0.5 – 0.59	**25 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
		0.4 – 0.49	**21.25 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
96 hours	15 mcg/m^2/day	1.5 – 1.59	**96.25** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		1.4 – 1.49	**90** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		1.3 – 1.39	**83.75** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		1.2 – 1.29	**77.5** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		1.1 – 1.19	**71.25** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		1 – 1.09	**65** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		0.9 – 0.99	**58.75** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		0.8 – 0.88	**52.5** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		0.7 – 0.79	**46.25** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		0.6 – 0.69	**40** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		0.5 – 0.59	**33.75** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**
		0.4 – 0.49	**27.5** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5mL/hr**

APPENDIX 5 **EXCEPTIONAL SCHEDULES**

INFUSIONS BAGS (Fixed-dosing for patients ≥ 45kg)

Bag duration	Daily dose	BLINATUMOMAB dose, infusion duration and rate
24 hours	9mcg/day	**10.375 micrograms** in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
48 hours	9mcg/day	**21.25** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5ml/hr**
24 hours	28mcg/day	**32.5** micrograms in sodium chloride 0.9%* infused over **72 hours** at a rate of **3.3 mL/hr**
48 hours	28mcg/day	**65** micrograms in sodium chloride 0.9%* infused over **96 hours** at a rate of **2.5ml/hr**

Liaise with a pharmacist regarding exceptional schedules for BSA-based dosing and/or CADD cassettes.