GENESIS
IN THIS TOGETHER
DEPARTMENT OF PHARMACY

Tenecteplase Receiving Standard Work

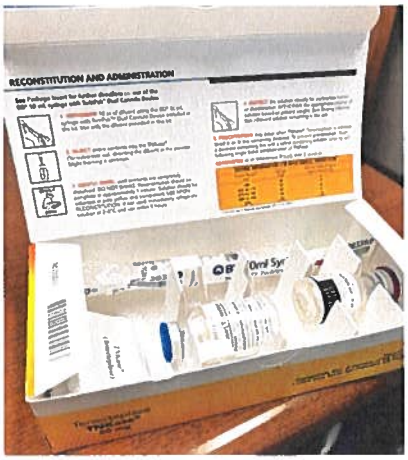
Updated January 16, 2023

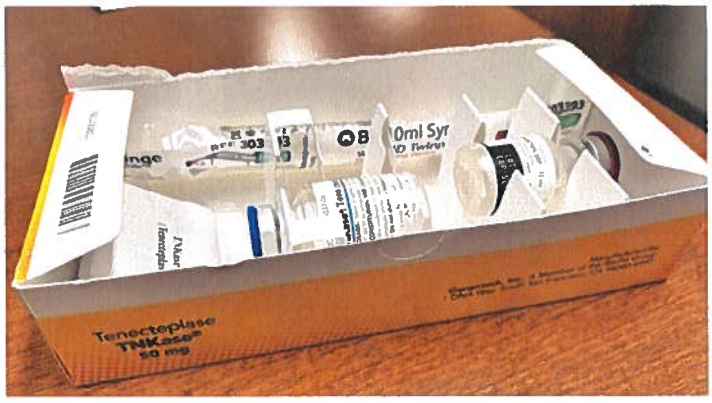
General Considerations

Genesis Health System uses tenecteplase (TNKase) for treatment of ischemic stroke. To avoid confusion of stroke dosing and myocardial infarction with the packaging, follow the below standard work when receiving into the pharmacy from the wholesaler.

Standard Work

1. When you receive tenecteplase before putting it in the carousel, open the tenecteplase box. Rip off the top cover of the box that contains the reconstitution and administration instructions. Discard the ripped off portion.





2. Put the box that has the drug and supplies (with cover ripped off) with a stroke reconstitution and administration card that is printed on cardstock in a 9 x 13 bag.

**If there are no remaining stroke reconstitution and administration cards printed, print more off from page 2 of this standard work document from formweb.

3. Receive into carousel for dispensing with correct expiration date found on the box.

4. Load into Omnicell in bag that contains the box and the stroke reconstitution and administration card with the correct expiration date found on the box.

RECONSTITUTION AND ADMINISTRATION

See Package Insert for further directions on use of the BD® 10 mL syringe with TwinPak™ Dual Cannula Device.

1. **WITHDRAW** 10 cc of diluent using the BD® 10 mL syringe with TwinPak™ Dual Cannula Device included in the kit. Use only the diluent provided in this kit.

2. **INJECT** entire contents into the TNKase® (Tenecteplase) vial, directing the diluent at the powder. Slight foaming is common.

3. **GENTLY SWIRL** until contents are completely dissolved. DO NOT SHAKE. Reconstitution should be complete in approximately 1 minute. Solution should be colorless or pale yellow and transparent. USE UPON RECONSTITUTION. If not used immediately, refrigerate solution at 2–8°C and use within 8 hours.

4. **INSPECT** the solution visually for particulate matter or discoloration. WITHDRAW the appropriate volume of solution based on patient weight. (See Dosing Information.) Discard solution remaining in the vial.

5. **PRECIPITATION** may occur when TNKase® (Tenecteplase) is administered in an IV line containing dextrose. To prevent precipitation, flush a dextrose-containing line with a saline-containing solution prior to and following single-bolus administration of TNKase.

ADMINISTER as an intravenous BOLUS over 5 seconds.

DOSING INFORMATION FOR ACUTE ISCHEMIC STROKE

Patient Weight (kg)	TNKase (mg)	Volume TNKase* to be administered (mL)
35-37.99	9	1.8
38-41.99	10	2
42-45.99	11	2.2
46-49.99	12	2.4
50-53.99	13	2.6
54-57.99	14	2.8
58-61.99	15	3
62-65.99	16	3.2
66-69.99	17	3.4
70-73.99	18	3.6
74-77.99	19	3.8
78-81.99	20	4
82-85.99	21	4.2
86-89.99	22	4.4
90-93.99	23	4.6
94-97.99	24	4.8
98 or greater	25	5

*From one vial of TNKase reconstituted with 10mL sterile water for injection

- Discard solution remaining in the vial
- If tenecteplace is not administered, return to pharmacy unused vial and syringe
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