

C enter for H uman P henomic S cience	University of Pennsylvania Health System	CHPS SOP 14
Standard of Operating Procedure	Inclusion/Exclusion Criteria for CHPS and PCAM Infusion	Page 1 of 4

PURPOSE: To provide information to CHPS staff, PCAM staff, and Clinical Study Teams (CSTs) regarding the process of scheduling appointments for outpatients on CHPS Perelman (PCAM) 4 South and PCAM Infusion on 2, 3 and 4 West.

SCOPE: CSTs, CHPS staff and leadership, and PCAM infusion staff and leadership

PROCEDURE:

1. Feasibility questions regarding CHPS versus PCAM Infusion eligibility that are not addressed in this SOP should be discussed with the CHPS nurse manager prior to consenting or scheduling patients.
2. Participants enrolled on research protocols that include treatment days with standard-of-care only infusions only (i.e. no investigational medications will be administered on that treatment day) may be scheduled on PCAM Infusion on those treatment days. Exceptions can be made if medications are provided by the Investigational Drug Services (IDS) pharmacy. When the medications come from the standard-of-care pharmacy on PCAM West, the appointment may be scheduled in PCAM Infusion.
3. There are several scenarios in which scheduling in PCAM Infusion is appropriate. These include:
 - a. Entire study is appropriate to take place in PCAM Infusion. Examples include:
 - i. Billing is completed entirely through insurance.
 - ii. There are no investigational medications included in the study.
 - iii. Research tasks are simple enough that they don't require CHPS staffing ratios.

<p>Center for Human Phenomic Science</p>	<p>University of Pennsylvania Health System</p>	<p>CHPS SOP 14</p>
<p>Standard of Operating Procedure</p>	<p>Inclusion/Exclusion Criteria for CHPS and PCAM Infusion</p>	<p>Page 2 of 4</p>

- b. Certain treatment days take place at CHPS and other treatment days take place in PCAM Infusion. Examples of treatment days that should take place in PCAM Infusion include:
 - i. IVIG administration dispensed through PCAM pharmacy and billed to patient insurance, growth factor administration, other supportive treatments only
- c. Study is initiated in the CHPS unit and after several cycles is appropriate to move to PCAM Infusion.
 - i. For example: Intensive sampling and vital sign measurements are required in the early cycles of treatment and are no longer required on subsequent cycles.
- 4. Participants should be scheduled in PCAM Infusion if and when the following eligibility criteria are met:
 - a. Duration of appointment does not exceed 300 minutes.
 - b. Duration of observation period does not exceed 60 minutes.
 - c. Blood draws are *not* serial or time-sensitive (e.g. pre-dose PK is required any time before the start of infusion, post-dose PK is required any time after the end of infusion). If sample processing is required and the study team cannot perform the processing, the patient must stay in CHPS.
 - d. Serial vital signs are *not* required throughout the infusion.
- 5. During CHPS protocol review meetings, we evaluate if and when a study meets inclusion criteria for PCAM Infusion, as a means to create capacity for new studies in the CHPS unit.

Center for Human Phenomic Science	University of Pennsylvania Health System	CHPS SOP 14
Standard of Operating Procedure	Inclusion/Exclusion Criteria for CHPS and PCAM Infusion	Page 3 of 4

- a. When submitting the CHPS budgeting request, please also include when (if any) the participants would meet PCAM infusion inclusion criteria, so we can plan accordingly.
 - b. The study team will be expected to schedule participants in PCAM Infusion once the planned Cycle and Day has been reached for the research participant.
6. To schedule in PCAM Infusion, please follow the below process:
- a. Send the template below to the PCAM Infusion Scheduling distribution list (PCAMInfusionScheduling@uphs.upenn.edu):

MRN	
Patient Name	
Provider	
Diagnosis Code	
Date of Appointment	
Clinic Appointment	
Name of Treatment	
Duration of Treatment	

- b. If the participant needs labs drawn through their central line prior to their treatment appointment, please also specify that the participant will need a 20-minute injection appointment on the same floor as their Provider visit. This appointment should be scheduled 30-40 minutes prior to their Return patient visit/New patient visit with their Provider.

C enter for H uman P henomic S cience	University of Pennsylvania Health System	CHPS SOP 14
Standard of Operating Procedure	Inclusion/Exclusion Criteria for CHPS and PCAM Infusion	Page 4 of 4

- c. If the participant will have their labs drawn via phlebotomy prior to their clinic visit, please make sure to make a lab appointment for the participant on the respective floor.

Please note: If the participant will be scheduled in PCAM Infusion routinely, the above process will not need to be repeated. Instead, the provider’s administrative assistant and/or the PCAM Infusion PSA staff will schedule infusion appointments via the After Visit Summary provided at the end of their visit.

7. Billing considerations:
- Visits that will be billed entirely through insurance should not be scheduled at CHPS, as the CHPS billing workflow does not include insurance verification and pre-authorization at the point of care.
 - Cooperative Group trials often involve both insurance and research billing components. These trials should be taken on a case-by-case basis and reviewed by CHPS and PCAM Infusion leadership to determine appropriate placement.
8. This SOP is subject to change pending billing and pharmacy considerations.

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