




Cathflo® Activase® (alteplase) 2 mg is the standard of care for treatment of thrombotically occluded catheters


Administration¹


After **WASHING** hands and applying gloves:

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After reconstitution using aseptic technique, perform hand hygiene, and don gloves. **INSPECT** solution for foreign matter and discoloration.
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INSTILL the appropriate dose of Cathflo into the occluded catheter (see dosing chart below).
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After 30 minutes of **DWELL** time, assess the catheter function by attempting to aspirate blood. If the catheter is functional, go to step 5; if not functional, go to step 4.
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ASSESS catheter function after a total of 120 minutes of dwell time by attempting to aspirate blood. If catheter is functional, go to step 5. If catheter is still occluded, a second dose of equal amount may be instilled. Repeat steps 1 through 3.
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If catheter function has been restored, **ASPIRATE** 4 mL to 5 mL of blood in patients ≥ 10 kg or 3 mL in patients < 10 kg to remove Cathflo and residual clot. Then discard aspirate, and flush catheter with 0.9% Sodium Chloride, USP. **Any unused solution should be discarded.**



Single-use vial

Note: Store lyophilized Cathflo at refrigerated temperature (2°C–8°C/36°F–46°F). Cathflo should be reconstituted immediately before use. The solution may be used within 8 hours if stored at 2°C to 30°C (36°F–86°F). **No other medication should be added to solutions containing Cathflo.**

FDA-approved dosing with Cathflo Activase (alteplase) 2 mg¹

Patient weight	Cathflo dose
≥ 30 kg (66 lb)	2 mg in 2 mL
< 30 kg (66 lb)	110% of the internal lumen volume of CVAD, not to exceed 2 mg in 2 mL

CVAD=central venous access device.

Indication

Cathflo Activase (alteplase) is indicated for the restoration of function to central venous access devices as assessed by the ability to withdraw blood.

Important Safety Information

Contraindications

Cathflo Activase should not be administered to patients with known hypersensitivity to alteplase or any component of the formulation.

Please see additional Important Safety Information on reverse side.

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Highest Level of Evidence in CVAD Guidelines

Cathflo is the only thrombolytic recommended by clinical practice standards, including the Infusion Nurses Society (INS), Association for Vascular Access (AVA), American Association of Critical Care Nurses (AACN), and Oncology Nursing Society (ONS).²⁻⁷



Use 2 mg alteplase (Cathflo Activase) to restore patency and maintain catheter function.⁴

- Class 1; Level of Evidence A, ONS Access Device Standards of Practice, 2017, page 10, section VI, practice standard B



Instillation of alteplase 2 mg (Cathflo Activase) based on manufacturers' directions for use is recommended in current guidelines. There is limited research available to support the efficacy of thrombolytic drugs for alternative dosing.²

- Class 1; Level of Evidence A, INS Infusion Therapy Standards of Practice, 2016, page S105, standard 48, practice criterion G-2

Important Safety Information

Precautions

General

Certain causes of catheter dysfunction should be considered before treatment with Cathflo Activase (e.g. catheter malposition, mechanical failure, constriction by a suture and lipid deposits or drug precipitates within the catheter lumen).

Bleeding

The most frequent adverse reaction associated with all thrombolytics in all approved indications is bleeding.

Should serious bleeding in a critical location (e.g., intracranial, gastrointestinal, retroperitoneal, pericardial) occur, treatment with Cathflo Activase should be stopped and the drug should be withdrawn from the catheter.

Infections

Cathflo Activase should be used with caution in the presence of known or suspected infection in the catheter.

Adverse Reactions

In clinical trials, the most serious adverse events reported after treatment were sepsis, gastrointestinal bleeding, and venous thrombosis.

Please see Indication and Important Safety Information on reverse side. Please also see accompanying full Prescribing Information.

References: **1.** Cathflo Prescribing Information. Genentech USA, Inc. **2.** Infusion Nurses Society. Infusion therapy standards of practice. *J Infus Nurs.* 2016;39 (suppl 1):S1-S159. **3.** Camp-Sorrell D, ed. *Access Device Standards of Practice for Oncology Nursing.* 4th ed. Pittsburgh, PA: Oncology Nursing Society; 2017. **4.** McKnight S. Nurse's guide to understanding and treating thrombotic occlusion of central venous access devices. *Medsurg Nurs.* 2004;13(6):377-382. **5.** Haire WD, Herbst SF. Consensus conference on the use of alteplase (t-PA) for the management of thrombotic catheter dysfunction. *J Vasc Access Devices.* Summer 2000:1-8. **6.** Criddle LM. Ask the experts. *Crit Care Nurse.* 2007;27(3):78-81. **7.** Cummings-Winfield C, Mushani-Kanji T. Restoring patency to central venous access devices. *Clin J Oncol Nurs.* 2008;12(6):925-934.

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