



Patient pathway for CAR T cell therapy

Creator: Velindre University NHS Trust

Document version number: V1.0

Date written: October 2018

End user rights:

This document is shared with permission for re-use to distribute, remix, adapt, and build upon the material in any medium or format for non-commercial purposes only, so long as the attributions listed below are given.

Attributions: Velindre University NHS Trust

This document is made available under a Creative Commons Attribution - NonCommercial 4.0 International License as described here:
<https://creativecommons.org/licenses/by-nc/4.0/>

.....

The information, materials and any opinions contained in this document are provided for general information and educational purposes only, are not intended to constitute legal or other professional advice and should not be relied on or treated as a substitute for specific advice relevant to particular circumstances. Although we make all reasonable efforts to ensure the information is up to date, we make no representations, warranties or guarantees in that regard. In no event shall the creator(s) be liable for any direct, indirect, special, consequential or other damages that are related to the use or reliance whatsoever in the content of the document or any part thereof.



Patient pathway for CAR T cell therapy

Patient identified in clinic by consultant, lymphocyte count, bloods, influenza swab, pregnancy test, request additional work up, review medications to prepare for apheresis, consent.

Consultant to refer to the national MDT for approval.

Consultant to complete initial Blue Tec form, apheresis communication form to be completed by the consultant patient to meet apheresis team - written/verbal information given.

Apheresis team to initiate on KITE connect or NOVARTIS cell chain after confirmation from national meeting. Confirmation on system of manufacturing slot and apheresis date.

Apheresis team to complete suitability form when all test results are obtained, consultant to sign, cancel or continue to apheresis.

Patient may have optional bridging chemotherapy at referring hospital.

Apheresis team to collect all work up results and prepare protocol pack - to include protocol, work up results consent, latest clinic letter, CRS Toxicity grading / Neuro toxicity grading, pre conditioning check, pre infusion checklist, daily assessment sheet. Consultant to sign protocol when cells have arrived back at NHSBT. Consultant and apheresis team to check KITE connect or NOVARTIS cell chain for progress of CAR T MANUFACTURING TAKES 3-4 WEEKS.

Infusion date to be confirmed by the consultant Apheresis team to put PIC referral in for admission dates (to go on ALLO diary), PIC referral to haematology day unit for conditioning, conditioning will be Wednesday, Thursday and Friday, patient admission Sunday day-1, arrange PICC line insertion if required, alert all teams of admission and infusion dates.

CAR T to be delivered cryopreserved to NHSBT. Product will be checked as per SOP.

Pre conditioning checklist to be completed by training doctor, check list to be completed again pre infusion. Patient to be an inpatient for 10 days, a daily assessment will be completed with assessments done BD by registrar. Follow toxicity SOP.

On discharge, patient to attend haematology day unit Monday, Tuesday and Friday in hot clinic for the first week, twice a week for the second week and weekly clinic until required. Patient is not to drive for 8 weeks and to stay no further than 1 hours drive for first 4 weeks.