**PROTOCOL CODE: UBRAVERIB**

A BC Cancer “Compassionate Access Program” request form must be completed and approved prior to treatment.

**DOCTOR’S ORDERS**

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<tr>
<th>Ht</th>
<th>Wt</th>
<th>BSA</th>
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**REMINDER:** Please ensure drug allergies and previous bleomycin are documented on the Allergy & Alert Form.

Date of Previous Cycle:

- [ ] Delay Treatment _____________ week(s)
- [ ] CBC & Diff, Platelets day of treatment
  May proceed with doses as written if within 24 hours ANC **greater than or equal to** $1.0 \times 10^9$/L, Platelets **greater than or equal to** $75 \times 10^9$/L
  Dose modification for:  
  - [ ] Hematology
  - [ ] Renal Function
  - [ ] Other Toxicity

Proceed with treatment based on blood work from _____________

**PREMEDICATIONS:** Patient to take own supply. RN/Pharmacist to confirm ________________.

- [ ] prochlorperazine 10 mg PO prior to treatment
- [ ] metoclopramide 10 to 20 mg PO prior to treatment
- [ ] Other:

**CHEMOTHERAPY:**

**DAY 1 and 8**

eriBULin $1.4 \text{mg/m}^2/\text{day}$ x BSA = __________mg

- [ ] Dose Modification: ________% = ________ mg/m²/day x BSA = __________ mg
  - IV Push over 2 to 5 minutes on Day 1 and Day 8.

**OR**

**DOSE MODIFICATION REQUIRED ON DAY 8**

eriBULin $1.4 \text{mg/m}^2/\text{day}$ x BSA = __________mg

- [ ] Dose Modification: ________% = ________ mg/m²/day x BSA = __________ mg
  - IV Push over 2 to 5 minutes on Day _______________.

**RETURN APPOINTMENT ORDERS**

- [ ] Return in **three** weeks for Doctor and Cycle_____. Book chemo room Day 1 and Day 8*
- [ ] Last Cycle. Return in ________ weeks.

* if day 8 treatment given on day 15, start of next cycle is 2 weeks from day 15

CBC & Diff, platelets, **sodium, potassium, Creatinine, bilirubin, GGT, alk phos, ALT, LDH** prior to Day 1

CBC & Diff, platelets, Creatinine prior to Day 8

If clinically indicated:

- [ ] Total Protein
- [ ] Albumin
- [ ] BUN

- [ ] Other Tests:
- [ ] Consults:
- [ ] See general orders sheet for additional requests.

**DOCTOR’S SIGNATURE:**

**SIGNATURE:**

**UC:**