



Provincial Health Services Authority

Information on this form is a guide only. User will be solely responsible for verifying its currency and accuracy with the corresponding BC Cancer treatment protocols located at [www.bccancer.bc.ca/terms-of-use](http://www.bccancer.bc.ca/terms-of-use) and according to acceptable standards of care.

**PROTOCOL CODE: GUBDDMVAC**

**DOCTOR'S ORDERS**

Ht \_\_\_\_\_ cm Wt \_\_\_\_\_ kg BSA \_\_\_\_\_ m<sup>2</sup>

**REMINDER:** Please ensure drug allergies and previous bleomycin are documented on the Allergy & Alert Form

**DATE:**

**To be given:**

**Cycle #:**

Date of Previous Cycle:

- Delay treatment \_\_\_\_\_ week(s)
- CBC & Diff, Platelets** day of treatment

May proceed with doses on Day 1 as written if within 24 hours **ANC greater than  $1.0 \times 10^9/L$ , Platelets greater than or equal to  $90 \times 10^9/L$ , and Creatinine Clearance greater than or equal to 60 mL/min\***

\*If CISplatin on Days 1 and 2: **Creatinine Clearance greater than or equal to 45 mL/min**

Dose modification for:  **Hematology**  **Other Toxicity** \_\_\_\_\_

**Proceed with treatment based on blood work from** \_\_\_\_\_

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

**dexamethasone**  **8 mg** or  **12 mg** (select one) PO 30 to 60 minutes prior to treatment on **Day 2**  
and **select ONE** of the following:

<input type="checkbox"/>	<b>aprepitant 125 mg</b> PO 30 to 60 minutes prior to treatment on <b>Day 2</b> <b>ondansetron 8 mg</b> PO 30 to 60 minutes prior to treatment on <b>Day 2</b>
<input type="checkbox"/>	<b>netupitant-palonosetron 300 mg-0.5 mg</b> PO 30 to 60 minutes prior to treatment on <b>Day 2</b>
<input type="checkbox"/>	<b>ondansetron 8 mg</b> PO 30 to 60 minutes prior to treatment on <b>Day 2</b>

Additional premedications if giving CISplatin split dosing:

- dexamethasone**  **8 mg** or  **12 mg** (select one) PO 30 to 60 minutes prior to treatment on **Day 1**
- ondansetron 8 mg** PO 30 to 60 minutes prior to treatment on **Day 1**

Other:

**HYDRATION:**

**Prehydration** 1000 mL NS IV over 60 minutes prior to CISplatin on **Day 2**

**Prehydration** 1000 mL NS IV over 60 minutes prior to CISplatin on **Day 1** (if CISplatin is given on Days 1 and 2)

**DOCTOR'S SIGNATURE:**

**SIGNATURE:**

**UC:**



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## DOCTOR'S ORDERS

DATE:

### CHEMOTHERAPY:

methotrexate 30 mg/m<sup>2</sup> x BSA = \_\_\_\_\_ mg

Dose Modification: \_\_\_\_\_ % = \_\_\_\_\_ mg/m<sup>2</sup> x BSA = \_\_\_\_\_ mg

IV push **Day 1**

vinBLAS<sup>t</sup>ine 3 mg/m<sup>2</sup> x BSA = \_\_\_\_\_ mg

Dose Modification: \_\_\_\_\_ % = \_\_\_\_\_ mg/m<sup>2</sup> x BSA = \_\_\_\_\_ mg

IV in 50 mL NS over 15 minutes on **Day 2**

DOXOrubicin 30 mg/m<sup>2</sup> x BSA = \_\_\_\_\_ mg

Dose Modification: \_\_\_\_\_ % = \_\_\_\_\_ mg/m<sup>2</sup> x BSA = \_\_\_\_\_ mg

IV push **Day 2**

CISplatin 70 mg/m<sup>2</sup>/day x BSA = \_\_\_\_\_ mg

Dose Modification: \_\_\_\_\_ % = \_\_\_\_\_ mg/m<sup>2</sup> x BSA = \_\_\_\_\_ mg

IV in 500 mL NS, with potassium chloride 20 mEq, magnesium sulfate 1 g, and mannitol 30 g over 1 hour **Day 2**

**OR**

CISplatin 35 mg/m<sup>2</sup>/day x BSA = \_\_\_\_\_ mg

Dose Modification: \_\_\_\_\_ % = \_\_\_\_\_ mg/m<sup>2</sup> x BSA = \_\_\_\_\_ mg

IV in 500 mL NS, with potassium chloride 20 mEq, magnesium sulfate 1 g, and mannitol 30 g over 1 hour **Days 1 and 2**

## RETURN APPOINTMENT ORDERS

Return in **two** weeks for Doctor and Cycle \_\_\_\_\_. Book chemo on Day 1 & 2

Post Cycle 1 only: Book filgrastim (G-CSF) SC teaching and first dose on Day \_\_\_\_

Last Cycle. Return in \_\_\_\_\_ week(s).

**CBC & Diff, Platelets, creatinine, ALT, alkaline phosphatase, bilirubin, LDH** prior to each cycle

**Other tests:**

**Consults:**

**See general orders sheet for additional requests.**

**DOCTOR'S SIGNATURE:**

**SIGNATURE:**  
**UC:**