



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: GUMVAC

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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 as written if within 24 hours ANC greater than 1.5 x 10<sup>9</sup>/L, Platelets greater than or equal to 90 x 10<sup>9</sup>/L, and for Day 2, Creatinine Clearance greater than or equal to 60 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 (circle one) PO 30 to 60 minutes prior to treatment on Day 2

and select ONE of the following:

- ondansetron 8 mg PO 30 to 60 minutes prior to treatment on Day 2
- aprepitant 125 mg PO 30 to 60 minutes prior to treatment on Day 2, then 80 mg PO daily on Day 3 and 4
- ondansetron 8 mg PO 30 to 60 minutes prior to treatment on Day 2
- netupitant-palonosetron 300 mg-0.5 mg PO 30 to 60 minutes prior to treatment on Day 2

HYDRATION:

Prehydration 1000 mL NS IV over 60 minutes Day 2

CHEMOTHERAPY:

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

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

IV push Days 1, 15 and 22

vinBLAStine 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 Days 2, 15 and 22

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

RETURN APPOINTMENT ORDERS

Return in **four** weeks for Doctor and Cycle \_\_\_\_\_. Book chemo Days 1, 2, 15 & 22

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

CBC & Diff, Platelets, Creatinine, AST, ALT, Alk Phos, Bili, LDH prior to each cycle

If clinically indicated:  Bilirubin  ALT

Other tests:

Consults:

See general orders sheet for additional requests.

DOCTOR'S SIGNATURE:

SIGNATURE:

UC: