



Clinical Cancer Drug Order Review Checklist*

In addition to the procedures discussed in Module 2, supplemental error prevention tips are included in the checklist steps below.

1. **Verify Patient Identity (Two Identifiers)**
(per Directive III-30-05 [Safe Handling Manual – Module 2-Directives])
 - Consider looking up patients using a PHN or other unique identification number and then confirm that the name is correct
 - Ensure identification on paper documents and computer screen match
2. **Confirm Correct Protocol and that it Matches Clinical Indication and Eligibility for Treatment**
 - Watch for look-alike protocol names that only differ by one letter
3. **Review Medical History**
 - Ensure patient is informed of potential drug/food interactions and management (e.g., more frequent INR testing for warfarin interactions)
 - Consider if adverse effects might interfere with medications (e.g., diarrhea-induced INR prolongation and possible bleeding with warfarin)
 - Review pregnancy assessment of the patient and document (if applicable)
4. **Check Timing of Treatment**
 - Check for potential treatment scheduling errors by ensuring that the interval between treatments matches the protocol's interval requirements (unless otherwise specified by physician)
 - Ensure correct treatment day for multiday orders (i.e., is it day 1 or 8?)
5. **Determine Patient's Body Surface Area (if applicable)**
 - Confirm weight is in correct units (kg or pounds) if unusually high or low
6. **Check Appropriateness of Cancer Drug Dose(s)**
 - Check the original order for multiday orders to see if any changes were made (e.g., has the physician reduced or canceled the dose for day 8?)
 - Check if the patient is receiving another concurrent treatment (eg., radiation therapy), and determine whether the dose and timing of cancer drug therapy is appropriate when used concurrently with the other therapy
 - Watch for additional notes in preprinted orders (PPOs) emphasizing

- important information like dose caps (e.g., vincristine capped at 2 mg)
- If the dose is AUC based, refer to the protocol to see if an AUC is specified
- Compare the PPO to the protocol to ensure that all required drugs are ordered (e.g., rituximab on page 2 of PPO)
- Determine if the patient will understand how to take the oral medication to get the correct dose? Are the instructions clear enough, or are additional tools required (e.g., blister packs or calendars)

7. Review Laboratory Values

- Are any labs cycle-specific (e.g., for the BRAJACT protocol, ALT and bilirubin are measured before cycle 1 and 5)?
- Are labs required to ensure correct dose (e.g., kidney function tests for carboplatin dose)?
- Does nadir blood work need to be checked (e.g., Day 22 ANC for adjuvant CNAJTZRT given q28 days)?
- Consult the protocol for additional lab requirements that may not be listed on the PPO such as:
 - o repeat lab requirements after abnormal test results (e.g., repeat CBC on day 5 if ANC on day 1 less than 1×10^9 in the GUBEP)
 - o tests required to monitor toxicity (e.g., audiogram or pulmonary function tests for bleomycin, cardiac function for trastuzumab)

8. Verify Appropriate Method of Drug Delivery

- Has the correct route been selected for protocols with more than one possible route of administration (e.g., paclitaxel IV or IP in GOOVIPPC, or etoposide PO or IV in GOOVETO)?

9. Monitor for Potential Cancer Drug Toxicity

- Ensure the patient knows to report adverse effects (AEs) that require immediate interventions (e.g., extravasation or fever). See the Symptom & Side Effect Management Resource Guide for links to information on managing AEs, including BC Cancer Symptom Management Guidelines and Policies.
- To reduce possible AEs from 5-FU Infusor[®] rate errors, ensure that patient knows how long the infusion should last and what to do if it seems to be running too fast or slow. Refer to ***Elastomeric Infusors for fluorouracil (5-FU)*** [Frequently Asked Questions - Cancer Drug Preparation and Administration] and the patient handout: Your Infusor[®]: A Guide for Patients.

10. Verify Protocol-Related Supportive Care Provided

- Check for medications that must be taken one or more days prior to treatment (e.g., folic acid & Vit B12 pre pemetrexed or dexamethasone)



pre docetaxel).

* Note: This Checklist is intended to be used in conjunction with the information provided in Module 2: *Cancer Drug Order Assessment and Review*.