

CST Bulletin – March, 2022

# BC Cancer ST Program Updates for March, 2022

AFFECTED APPLICATION(S)	PowerChart: Oncology/Hematology Regimens and PowerPlans
AFFECTED AREA(S)	BC Cancer VC (Oncologists, Oncology Pharmacy, and Oncology Nursing Staff)
NET NEW, OR UPDATE TO EXISTING BUILD	Update to Existing Build

# What has Changed?

Any changes released that affect Oncology Regimens and PowerPlans/Cycles for the **BC Cancer Systemic Therapy (ST) Program** will be communicated monthly via Special Bulletin.

These notification changes are important for Nursing staff, Pharmacy, and Providers to be aware of for their patient's care.

# For Providers:

- <u>For PowerPlans that are versioned</u>: If your patient has already started on a Regimen, when you order the next cycle PowerPlan, a pop up window will appear to indicate a new version is required.
  - Click Yes to accept the new version.
  - **Do not** use the Copy Forward functionality to ensure that the updates apply.

W	zzONCP BR BRAVA7 - Cycle 1	Orders			*Est. Start Date: 27-Oct-2021 08:00 PD
關					"Est. Start Date: 17-Nov-2021
St	Copy forward details from 725	A new version of this plan is available. Would you like to	select the ne	w version?	Skip
器	zzONCP BR BRAVA7 - Cycle 3				*Est. Start Date: 08-Dec-2021
器	zzONCP BR BRAVA7 - Cycle 4		Yes	No	*Est. Start Date: 29-Dec-2021
謬	zzONCP BR BRAVA7 - Cycle 5		16	NO	*Est. Start Date: 19-Jan-2022
器	zzONCP BR BRAVA7 - Cycle 6				*Est. Start Date: 09-Feb-2022
器	zzONCP BR BRAVA7 - Cycle 7				*Est. Start Date: 02-Mar-2022
謬	zzONCP BR BRAVA7 - Cycle 8				*Est. Start Date: 23-Mar-2022

• **IMPORTANT:** Any change from the standard treatment regimen (dose modification, addition of pre-med, etc.) in the previous cycle will need to be manually added to the cycle that is being ordered with the new version (see additional documentation regarding versioning).

Please see this month's changes below.



# **PowerPlan: BRLACTWACG**

Cycles/PowerPlans: BRLACTWACG Cycles 1 to 4

#### Changes:

In the scheduling phase, an optional 'schedule BCC Teach – Subcutaneous Injection' was added

ONCP	BR BRL/	CTWACG Cycles 1 to 4 - Cycle 1, Scheduling (Initiated			
•	Ø	Infusion Chemotherapy Visit	,		Within 2 Weeks, Cycle 1: Chair time 170 minutes; Nurse time 75 minutes, Chair Time: 165 minutes, Nur Day 1
•	Ø	Infusion Chemotherapy Visit			Within 2 Weeks, Chair Time: 130 minutes, Nurse Time: 70 minutes, ONCP BR BRLACTWACG Cycles 1 tr Day 8
•	Ø	Infusion Chemotherapy Visit			Within 2 Weeks, Chair Time: 130 minutes, Nurse Time: 70 minutes, ONCP BR BRLACTWACG Cycles 1 to Day 15
$\checkmark$	🛛 🙁 🖄	Follow Up - Clinic - Oncology On Treatment		•	Physician Specialty: Medical Oncology, Tumor Group: Breast
		Schedule BCC Teach - Subcutaneous Injection			BCC VA ACU Patient Support Centre, Patient education and first injection, Cycle and Day TBD: schedul
	্ৰ	Go to Chemo Calendar to send next cycle to scheduling	g wait list		

Versioning: No

Jira: CST-156983

# PowerPlan: LYHDMTXPRO

### Cycles/PowerPlans: All Associated PowerPlans

Changes:

In the chemotherapy related labs phase, an "If clinically indicated" note was added and daily Alanine Aminotransferase, Bilirubin Total, Alkaline Phosphatase, Lactate Dehydrogenase, Gamma Glutamyl Transferase, starting on Day 2 for 6 days were added.

Ø	V	0	Component	Status	Dose	Details
ONCP	' LY LY	HDM	TXPRO (Inpatient) - Cycle 1, Chemotherapy R	elated Labs (Planne	d Pending)	
		2	methotrexate Level Draw Instructions			Chemo RN to order daily methotrexate level at hour 48 (fror
		_				Order name: Methotrexate Level Collection Priority: AM Dra
			POC Urinalysis Dipstick			q1h PRN, Check urine pH immediately prior to starting method
			Creatinine Level			Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day
	Ð	7	Electrolytes Panel (Na, K, Cl, CO2, Anion Gap)			Blood, AM Draw, Collection: T+1;0330, gdaily for 6 day
		ا 🏵	f clinically indicated:			
		7	Alanine Aminotransferase			Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day
	₽	2	Bilirubin Total			Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day
		1	Alkaline Phosphatase			Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day
		2	Lactate Dehydrogenase			Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day
		2	Gamma Glutamyl Transferase			Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day
/ers	sion	ing	: No			
Jira:	CS	ST-	155773			





A joint initiative of: Vancouver Coastal Health, the Provincial Health Services Authority, and Providence Health Care

# **PowerPlan: LYHDMRTEM**

#### Cycles/PowerPlans: All Associated PowerPlans

#### Changes:

In the chemotherapy related labs phase, an "If clinically indicated" note was added and daily Alanine Aminotransferase, Bilirubin Total, Alkaline Phosphatase, Lactate Dehydrogenase, Gamma Glutamyl Transferase, starting on Day 2 for 6 days were added.

2	Ø	methotrexate Level Draw Instructions	Chemo RN to order daily methotrexate level at hour 48 (from Order name: Methotrexate Level Collection Priority: AM Dra
7	2	POC Urinalysis Dipstick	q1h PRN, Check urine pH immediately prior to starting meth
7	2	Creatinine Level	Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day
7	R 🛛	Electrolytes Panel (Na, K, Cl, CO2, Anion Gap)	Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day
7		CBC and Differential	Blood, AM Draw, Collection: T+3;0330, once
	্ৰ	If clinically indicated:	
	2	Alanine Aminotransferase	Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day
	Q 🗇	Bilirubin Total	Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day
	2	Alkaline Phosphatase	Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day
	2	Lactate Dehydrogenase	Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day
	2	Gamma Glutamyl Transferase	Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day

#### Versioning: No

Jira: CST-155771

# PowerPlan: LYCODOXMR

#### Cycles/PowerPlans: LYCODOXMR (Inpatient)

#### Changes:

In the chemotherapy related labs phase, an "If clinically indicated" note was added and daily Alanine Aminotransferase, Bilirubin Total, Alkaline Phosphatase, Lactate Dehydrogenase, Gamma Glutamyl Transferase, starting on Day 11 for 6 days were added.

Image: Second	
🗆 💆 Alanine Áminotransferase Blood, AM Draw, Unit collect, Collection: T+1	
	10;0330, qdaily for 6 day
🔲 🗟 📝 Bilirubin Total Blood, AM Draw, Unit collect, Collection: T+1	10;0330, qdaily for 6 day
🗆 🗭 Alkaline Phosphatase Blood, AM Draw, Unit collect, Collection: T+1	10;0330, qdaily for 6 day
🗖 🔀 Lactate Dehydrogenase Blood, AM Draw, Unit collect, Collection: T+1	10;0330, qdaily for 6 day
🔲 📝 Gamma Glutamyl Transferase Blood, AM Draw, Unit collect, Collection: T+1	10;0330, qdaily for 6 day

### Versioning: No

TRANSFORMATIONAL

Jira: CST-155770



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# PowerPlan: LYCHOPRMTX

Cycles/PowerPlans: LYCHOPRMTX (Methotrexate Inpatient)

### Changes:

In the chemotherapy related labs phase, an "If clinically indicated" note was added and daily Alanine Aminotransferase, Bilirubin Total, Alkaline Phosphatase, Lactate Dehydrogenase, Gamma Glutamyl Transferase, starting on Day 2 for 6 days were added.

		methotrexate Level Draw Instructions	Chemo RN to order daily methotrexate level at hour 48 ( Order name: Methotrexate Level Collection Priority: AM
7		POC Urinalysis Dipstick	q1h PRN, Check urine pH immediately prior to starting i
7	2	Creatinine Level	Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day
7	R 💆	Electrolytes Panel (Na, K, Cl, CO2, Anion Gap)	Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day
	- <b>(</b> 9	If clinically indicated:	
1	2	Alanine Aminotransferase	Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day
	B 💆	Bilirubin Total	Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day
	2	Alkaline Phosphatase	Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day
	2	Lactate Dehydrogenase	Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day
	2	Gamma Glutamyl Transferase	Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day

# Versioning: N

Jira: CST-155769

# PowerPlan: LYVENOB

Cycles/PowerPlans: LYVENOB Cycle 1

### Changes:

In the Chemotherapy (day 1 to 2,8,15) phase, within the pre-chemo metrics section, the notes about Neutrophilis, Platelet Count, and bilirubin were updated to "...72 hours" from "... 96 hours".

🐣 Pre-Chemo Metrics
🛞 May proceed with treatment on Day 1 if:
Weutrophils Greater Than or Equal to 1.0 x 10^9/L within 72 hours
Platelet Count Greater Than or Equal to 25 x 10^9/L within 72 hours
Bilirubin Less Than or Equal to 3 x ULN within 72 hours

The order comment for the oBINutizumab (day 1) order was updated from 'vital signs prior to start of infusion and at every increment ..' to 'for cycle 1 day 1, vital signs prior to start of infusion, at hour 2 and then post infusion'. Everything else after 'refer to protocol for resuming ...' is unchanged.





🔗 oBINutuzumab (oBINutuzumab - oncology)	0 min				
100 mg, IV, once oncology, administer over: 4 hour, drug for Administer at 25 mg/h. For cycle 1 day 1, vital signs prior to					
oBINutuzumab (oBINutuzumab - oncology)					
Component: 100 mg, IV, once oncology, administer over: 4 hour, drug form: bag					
Order Comment: Administer at 25 mg/h. For cycle 1 day 1, vital signs prior to st then post infusion. Refer to protocol for resuming infusion fo If flushing, dyspnea, rigors, rash, pruritus, vomiting, chest pai discomfort or exacerbation of any existing symptoms occur, s Day 1	llowing a reaction. n, any other new acute				
Versioning: No					
Jira: CST-155768					

# PowerPlan: LYOBCHLOR

Cycles/PowerPlans: LYOBCHLOR Cycle 1

### Changes:

In the Chemotherapy (day 1 to 2,8,15) phase, the order comment for oBlNutuzumab DAY 1 has been updated from 'vital signs prior to start of infusion and at every increment ...' to 'for cycle 1 day 1, vital signs prior to start of infusion, at hour 2 and then post infusion'. Everything else after 'refer to protocol for resuming ...' is unchanged.

	🔗 oBINutuzumab (oBINutuzumab - oncology)	0 min	
	100 mg, IV, once oncology, administer over: 4 hour, drug for		
	Administer at 25 mg/h. For cycle 1 day 1, vital signs prior to	Planned	
▼	oBINutuzumab (oBINutuzumab - oncology)		
	Component:		
	100 mg, IV, once oncology, administer over: 4 hour, drug form	n: bag	
	Order Comment: Administer at 25 mg/h. For cycle 1 day 1, vital signs prior to st then post infusion. Refer to protocol for resuming infusion fo If flushing, dyspnea, rigors, rash, pruritus, vomiting, chest pair discomfort or exacerbation of any existing symptoms occur, s Day 1	llowing a reaction. n, any other new acute	
Versio	ning: No		
Jira: C	ST-155765		





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## PowerPlan: LYSMILE

### Cycles/PowerPlans: ONCP LY LYSMILE (inpatient)

#### Changes:

In the Chemotherapy related labs phase urine dipstick was added with the frequency of q8h and duration of 3 Days. The special instructions say "Check urine for blood with dipstick before each ifosfamide and every 8 hours. If positive at any time, notify doctor and send urine sample for urinalysis for verification and accurate determination of hematuria". The offset is set to 25 hours.

◄	+25 hr	POC Urinalysis Dipstick	q8h for 3 day, Check urine for Nood with dipstick before each ifosfamide and every 8 hours. If pos
		Baily Labs.	POC Urinalysis Dipstick
	+6 hr	POC Urinalysis Dipstick	Details:
◄	0	CBC and Differential	g8h for 3 day, Check urine for blood with dipstick before each ifosfamide and every 8 hours. If
◄	9	Electrolytes Panel (Na, K,	positive at any time, notify doctor and send urine sample for urinalysis for verification and
◄	0	Creatinine Level	accurate determination of hematuria
	)	Labs even Monday and Thursday for	pr Dave 8 to 20

A yellow note saying "if clinically related, post methotrexate:" was also added with Lab order for ALT, bilirubin, Alkaline Phosphatase, LDH and GGT.

🕉 If clinically indicated, post methotrexate:	
🖄 Alanine Aminotransferase	Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day
🖄 Alkaline Phosphatase	Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day
🕈 Lactate Dehydrogenase	Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day
🕈 Gamma Glutamyl Transferase	Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day

The yellow note that said "labs before pegaspargase dose and 48hours afterwards" has been updated to "labs before pegaspargase dose".

今 Labs before pegaspargase dose	
🕱 Day 8	
🖄 INR	Blood, Routine, Collection: T+7;0330, once
🖄 РТТ	Blood, Routine, Collection: T+7;0330, once
🖄 Fibrinogen Level	Blood, Routine, Collection: T+7;0330, once

The yellow note for fibrinogen has been updated to "If fibrinogen less than 0.5 g/L, give 4g of fibrinogen concentrate. Complete transfusion medicine order".

	🏹 Fibrinogen Level	Blood, Routine, Collection: T+7;0330, once
	🔇 If fibrinogen less than 0.5 g/L, give 4g of fibrin	ogen concentrate. Complete transfusion medicine order
he and the second se	🕉 it clinically indicated, post methotrexate:	
	🖄 Alanine Aminotransferase	Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day
	🖄 Alkaline Phosphatase	Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day
	🖄 Lactate Dehydrogenase	Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day
	🖄 Gamma Glutamyl Transferase	Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day





The day 10 yellow note and the labs underneath have been removed as well.

P.		
	🏈 Labs before pegaspargase dose	
	Oay 8	
	🖄 INR	Blood, Routine, Collection: T+7;0330, once
	🖄 РТТ	Blood, Routine, Collection: T+7;0330, once
	🖄 Fibrinogen Level	Blood, Routine, Collection: T+7;0330, once
		en concentrate. Complete transfusion medicine order
	🏈 If clinically indicated, post methotrexate:	
	🖄 Alanine Aminotransferase	Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day
	🖄 Alkaline Phosphatase	Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day
	🖄 Lactate Dehydrogenase	Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day
	🖄 Gamma Glutamyl Transferase	Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day

In the Chemotherapy related orders phase, a new dose option was added for filgrastim for 600 mcg.

L.		300 mcg, subcutaneous, qdaily, FN risk >= 20% w/ curative chemo regimen, drug form: syringe-inj, start: 1+5;1400
	Ng s	Starting on Day 6 at least 24 hours after chemotherapy, until ANC greater than 1 x 10^9/L
	🏈 Start co-trimoxazole (800mg-160mg) 1 tablet PO three times a week	300 mcg, subcutaneous, gdaily, FN risk >= 20% w/ curative chemo regimen, drug form: syringe-inj, start: T+5;1400
		480 mcg, subcutaneous, gdaily, FN risk >= 20% w/ curative chemo regimen, drug form: syringe-inj, start: T+5;1400
	🤹 🐣 valACYclovir	600 mcg, subcutaneous, gdaily, FN risk >= 20% w/ curative chemo regimen, drug form: syringe-ini, start: T+5;1400
Г	🗌 🏟 🐣 acyclovir	
	A PRN Medications	

In the Chemotherapy (day 1-5,8) phase the yellow note "before each pegaspargase dose…" has been updated to "before each pegaspargase dose, order INR, PT, PTT, and fibrinogen. If fibrigen level is less than .05g/L, give 4g of fibrinogen concentrate. Complete transfusion medicine order".

. 🗳 Day 8: 🕱 Before each pegaspargase dose, order INR, PT, PTT, and fibrinogen. If fibrigen level is less than 0.5g/L, give 4g of fibrinogen concentrate. Complete transfusion medicine order Schoose IV or IM pegaspargase:

The blue note "monitor BP and virals" has been updated to 2 note that read "For IV infusion: Monitor BP and vitals during pegaspargase administration at 15, 30 and 60 minutes; observe for 1 hour after end of infusion" and "For IM injection: Monitor BP and vitals, plus visual inspection of injection site before and after injection; and observe for 1 hour after injection".

For IV infusion: Monitor BP and vitals during pegaspargase administration at 15, 30 and 60 minutes; observe for 1 hour after end of infusion
For IM injection: Monitor BP and vitals, plus visual inspection of injection site before and after injection; and observe for 1 hour after injection

Versioning: Yes

Jira: CST-155763





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# PowerPlan: LYASPMEDEX

#### Cycles/PowerPlans: ONCP LY LYASPMEDEX

#### Changes:

ь÷,

In the Chemotherapy related labs phase, a yellow note saying "if clinically related, post methotrexate:" was added with Lab order for ALT, bilirubin, Alkaline Phosphatase, LDH and GGT.

🏈 If clinically indicated, post methotrexate:	
Alanine Aminotransferase	Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day
🖄 Alkaline Phosphatase	Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day
🖄 Lactate Dehydrogenase	Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day
🖄 Gamma Glutamyl Transferase	Blood, AM Draw, Collection: T+1;0330, qdaily for 6 day

A yellow note was added for "labs every Monday and Thursday" as well as the labs for LT, Alkaline phosphatase, GGT, bilirubin Total and Direct, amylase, lipase, random glucose were added.

Labs every Monday and Thursday	
🖄 Alanine Aminotransferase	Blood, AM Draw, Collection: T+1;0330, qMonThu for 3 week
🖄 Alkaline Phosphatase	Blood, AM Draw, Collection: T+1;0330, qMonThu for 3 week
🖄 Gamma Glutamyl Transferase	Blood, AM Draw, Collection: T+1;0330, qMonThu for 3 week
🗟 📝 Bilirubin Total and Direct	Blood, AM Draw, Collection: T+1;0330, qMonThu for 3 week
🖄 Amylase	Blood, AM Draw, Collection: T+1;0330, qMonThu for 3 week
🖄 Lipase	Blood, AM Draw, Collection: T+1;0330, qMonThu for 3 week
🖄 Glucose Random	Blood, AM Draw, Collection: T+1;0330, qMonThu for 3 week

The yellow note for Fibrinogen was updated to "If fibrinogen less than 0.5 g/L, give 4g of fibrinogen concentrate. Complete transfusion medicine order"

	nonnogen eeren	01000, 1111 01011, Concentrin 1 - 1,0000, 011
ં 🏈	If fibrinogen less than 0.5 g/L, give 4g of fibrinogen concentrate. Co	mplete transfusion medicine order
ં 🏈	Labs every Monday and Thursday	

In the Chemotherapy related orders phase, a new dose option was added for filgrastim for 600 mcg.

	😚 filgrastim (filgrastim (GRASTOFIL))	T.	600 mcg, subcutaneous, qdaily, FN risk >= 20% w/ curative chemo regimen, drug form: syringe-inj, start: T+5;1400 Start Day 6 and continue until ANC recovery 1 x 10^9/L past the nadir
	🕱 Choose one of the following:		300 mcg, subcutaneous, qdaily, FN risk >= 20% w/ curative chemo regimen, drug form: syringe-inj, start: T+5;1400
	🖗 🐣 valACYclovir		480 mcq, subcutaneous, qdaily, FN risk >= 20% w/ curative chemo regimen, drug form: syringe-inj, start: T+5;1400
	🐌 🐣 acyclovir		600 mcg, subcutaneous, qdaily, FN risk >= 20% w/ curative chemo regimen, drug form: syringe-inj, start: T+5;1400

In the Chemotherapy (day 1 to 2) phase, the Pegaspargase IV and IM orders now have a 1500 units /m<sup>2</sup> option as well.

		🕱 Choose IV or IM pegaspargase:	
	eže Beže	Pegaspargase (pegaspargase (ONCASPAR) - oncology) 2,500 unit/m2, IV, once oncology, administer over: 60 mi	
_	<b>•</b> ••*	2,500 unit/m2, IV, once oncology, administer over: 60 minute, drug form: inj	
	es	1,500 unit/m2, IV, once oncology, administer over: 60 minute, drug form: inj	
	I		
	eş,	pegaspargase (pegaspargase (ONCASPAR) - oncology) 2,500 unit/m2, IM, once oncology, drug form: inj	
	e ș	🕜 pegaspargase (pegaspargase (ONCASPAR) - oncology)	]





A joint initiative of: Vancouver Coastal Health, the Provincial Health Services Authority, and Providence Health Care The blue note "monitor BP and virals" has been updated to 2 note that read "For IV infusion: Monitor BP and vitals during pegaspargase administration at 15, 30 and 60 minutes; observe for 1 hour after end of infusion" and "For IM injection: Monitor BP and vitals, plus visual inspection of injection site before and after injection; and observe for 1 hour after injection"

#### For IV infusion: Monitor BP and vitals during pegaspargase administration at 15, 30 and 60 minutes; observe for 1 hour after end of infusion For IM injection: Monitor BP and vitals, plus visual inspection of injection site before and after injection; and observe for 1 hour after injection

Versioning: Yes

Jira: CST-155761

# **PowerPlan: GIGAVCOX and GIGAVFFOX** Cycles/PowerPlans: All Associated Regimens and PowerPlans Changes: The regimen description and link to protocol note verbiage have been updated from Palliative Treatment of Metastatic or Locally Advanced Gastric, Gastroesophageal Junction, or Esophageal Adenocarcinoma Using Oxaliplatin, Fluorouracil and Leucovorin to Palliative Treatment of Metastatic or Locally Advanced Gastric, Gastroesophageal Junction, or Esophageal Carcinoma Using Oxaliplatin, Fluorouracil and Leucovorin ONC GI GIGAVCOX (Pending) Hide additional details Regimen description: Palliative Treatment of Metastatic or Locally Advanced Gastric, Gastroesophageal Junction, or Esophageal Carcinoma Using Capecitabine, and Oxaliplatin ONCP GI GIGAVCOX - Cycle 1, Chemotherapy (Day 1) (Future Pending) \*Est. 23-Feb-2022 08:00 PST 88 Component 影 link to Protocol: Palliative Treatment of Metastatic or Locally Advanced Gastric, 🕉 Gastroesophageal Junction, or Esophageal Carcinoma Using Capecitabine, and Oxaliplatin Versioning: No Jira: CST-157747, CST-157746

Jira Ticket #	CST-157747, CST-157746, CST-156983, CST-155773, CST-155771, CST-155770, CST- 155769, CST-155768, CST-155765, CST-155763, CST-155761
How-to questions?	http://cstcernerhelp.healthcarebc.ca
Need further support?	CST Phone Support: 1-844-214-7444



