

## BC Cancer Systemic Therapy Program Updates for June, 2025

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

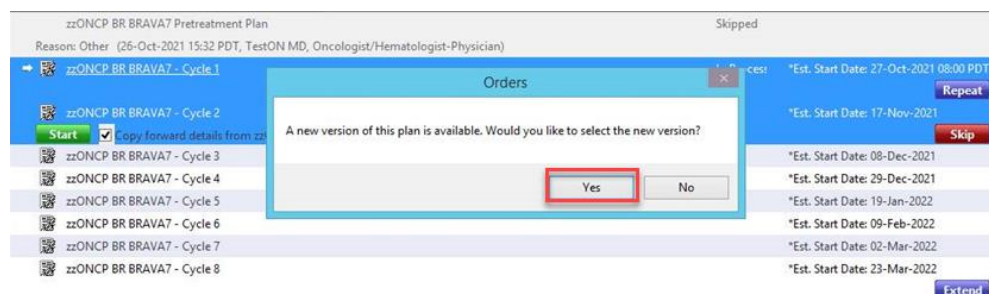
### What has Changed?

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:

- **For PowerPlans that are versioned:** 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.



- **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:

## Protocols: UMY0UF Teclistamab

### Regimens impacted:

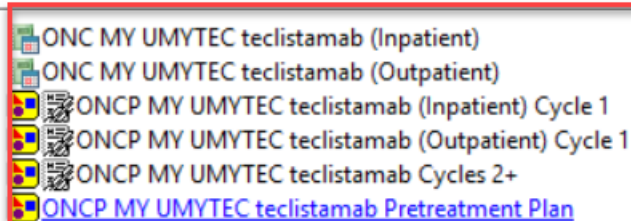
- ONC MY UMY0UF teclistamab (Inpatient)
- ONC MY UMY0UF teclistamab (Outpatient)

### PowerPlans Impacted:

- ONCP MY UMY0UF teclistamab Pretreatment Plan
- ONCP MY UMY0UF teclistamab (Inpatient) Cycle 1
- ONCP MY UMY0UF teclistamab (Outpatient) Cycle 1
- ONCP MY UMY0UF teclistamab Cycles 2+

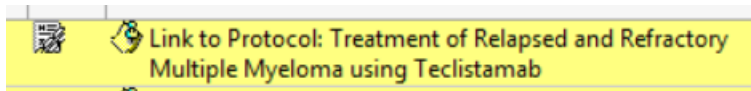
### For all listed PowerPlans:

- All references to UMY0UF throughout the regimen and PowerPlans have been removed and replace with UMYTEC (including in medication order comments and scheduling orders).



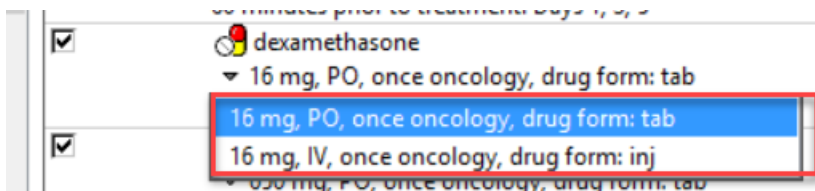
ONC MY UMYTEC teclistamab (Inpatient)  
 ONC MY UMYTEC teclistamab (Outpatient)  
 ONCP MY UMYTEC teclistamab (Inpatient) Cycle 1  
 ONCP MY UMYTEC teclistamab (Outpatient) Cycle 1  
 ONCP MY UMYTEC teclistamab Cycles 2+  
 ONCP MY UMYTEC teclistamab Pretreatment Plan

- **Updated Protocol title** to: Treatment of Relapsed and Refractory Multiple Myeloma using Teclistamab.



Link to Protocol: Treatment of Relapsed and Refractory Multiple Myeloma using Teclistamab

- Where applicable, **dexamethasone** pre-medication IV and PO has been changed to 16 mg dosing.



dexamethasone  
 16 mg, PO, once oncology, drug form: tab  
 16 mg, IV, once oncology, drug form: inj

- Updated all plan types to Oncology.



- Removed CAP Approved Protocol orders.
- Updated Prochlorperazine and metoclopramide orders to 60 min prior to treatment.

Pre-Medications			
<input type="checkbox"/>	prochlorperazine 10 mg, PO, once oncology, drug form: tab 60 minutes prior to treatment. Days 1, 3, 5	-60 min	-60 min
<input type="checkbox"/>	metoclopramide 10 mg, PO, once oncology, drug form: tab 60 minutes prior to treatment. Days 1, 3, 5	-60 min	-60 min

#### ONCP MY UMY0UF teclistamab Pretreatment Plan:

- Added Magnesium, phosphate, ferritin and C-reactive protein as required labs.

ONCP MY UMY0UF teclistamab Pretreatment Plan, Baseline Labs (Day 1) (Future Pending) *Est. 24-May-2025 08:00 PD			
	Component	Day 1 Future Pending *Est. 24-May-2025 08:00 PD	Actions
<input checked="" type="checkbox"/>	Calcium Level Blood, once, Order for future visit	Planned	
<input checked="" type="checkbox"/>	Magnesium Level Blood, once, Order for future visit	Planned	
<input checked="" type="checkbox"/>	Phosphate Level Blood, once, Order for future visit	Planned	
<input checked="" type="checkbox"/>	Albumin Level Blood, once, Order for future visit	Planned	
<input checked="" type="checkbox"/>	Lactate Dehydrogenase Blood, once, Order for future visit	Planned	
<input checked="" type="checkbox"/>	Glucose Random Blood, once, Order for future visit	Planned	
<input checked="" type="checkbox"/>	Protein Electrophoresis Blood, once, Order for future visit	Planned	
<input checked="" type="checkbox"/>	Immunoglobulin Light Chains Free Panel (Serum K/L Fr... Blood, once, Order for future visit	Planned	
<input checked="" type="checkbox"/>	Immunoglobulin Panel (IgA, IgG, IgM) Blood, once, Order for future visit	Planned	

ONCP MY UMYTEC teclistamab Pretreatment Plan, Baseline Labs (Day 1) (Future Pending) *Est. 24-May-2025 08:...			Day 1
Component			Future Pending
			*Est. 24-May-2025 08:...
			Actions
<input checked="" type="checkbox"/>		Immunoglobulin Panel (IgA, IgG, IgM) Blood, once, Order for future visit	Planned
<input checked="" type="checkbox"/>		Beta 2 Microglobulin Blood, once, Order for future visit	Planned
<input checked="" type="checkbox"/>		Ferritin Blood, once, Order for future visit	Planned
<input checked="" type="checkbox"/>		C-Reactive Protein High Sensitivity Blood, once, Order for future visit	Planned
<input checked="" type="checkbox"/>		Hepatitis C Antibody BCCDC Blood, once, Order for future visit	Planned
<input checked="" type="checkbox"/>		Hepatitis B Surface Antigen BCCDC Blood, once, Order for future visit	Planned
<input checked="" type="checkbox"/>		Hepatitis B Surface Antibody BCCDC Blood, once, Order for future visit	Planned
<input checked="" type="checkbox"/>		Hepatitis B Core Antibody Total BCCDC Blood, once, Order for future visit	Planned
If HBsAg or HBcoreAb positive, follow hepatitis B prophylaxis as per SCHBV protocol			

## ONCP MY UMY0UF teclistamab (Inpatient) Cycle 1:

### Pretreatment Labs Phase:

- Added required ferritin and C-reactive protein on Day 1.

ONCP MY UMYTEC teclistamab (Inpatient) Cycle 1 - Cycle 1, Pretreatment Labs (Day 1) (Future Pending) *Est. 24-May-2025 08:...			Day 1
Component			Future Pending
			*Est. 24-May-2025 08:...
			Actions
<input checked="" type="checkbox"/>		Protein Electrophoresis Blood, once, Order for future visit	Planned
<input checked="" type="checkbox"/>		Immunoglobulin Light Chains Free Panel (Serum K/L Fr... Blood, once, Order for future visit	Planned
<input checked="" type="checkbox"/>		Immunoglobulin Panel (IgA, IgG, IgM) Blood, once, Order for future visit	Planned
<input checked="" type="checkbox"/>		Beta 2 Microglobulin Blood, once, Order for future visit	Planned
<input checked="" type="checkbox"/>		Ferritin Blood, once, Order for future visit	Planned
<input checked="" type="checkbox"/>		C-Reactive Protein High Sensitivity Blood, once, Order for future visit	Planned

- Added yellow CDS note below Hep B serology tests: *If HbsAg or HBcoreAb positive, start hepatitis B prophylaxis as per SCHBV protocol.*



If HBsAg or HBcoreAb positive, follow hepatitis B prophylaxis as per SCHBV protocol

- **Removed** nursing orders and vital signs.
- **Moved** Day 3 and Day 5 labs to chemotherapy related labs phase (see next category for screenshots).

#### Chemotherapy Related Labs Phase:

- **Removed first yellow CDS note:** *If admission to hospital required.*
- **Added a yellow CDS note:** *Prior to treatment on Day 3:*
  - **Added** required Day 3 labs from pretreatment phase.
  - **Updated** order sentences to: *Blood, AM Draw, Collection: T+2;0330, once.*

Component	Status	Order	Notes
ONCP MY UMYTEC teclistamab (Inpatient) Cycle 1 - Cycle 1, Chemotherapy Related Labs (Future Pending)			
Prior to treatment on Day 3:			
<input checked="" type="checkbox"/> CBC and Differential		Blood, AM Draw, Collection: T+2;0330, once	
<input checked="" type="checkbox"/> Creatinine and Estimated GFR		Blood, AM Draw, Collection: T+2;0330, once	
<input checked="" type="checkbox"/> Sodium and Potassium Panel (Electrolytes Panel Outp...		Blood, AM Draw, Collection: T+2;0330, once	
<input checked="" type="checkbox"/> Calcium Level		Blood, AM Draw, Collection: T+2;0330, once	
<input checked="" type="checkbox"/> Magnesium Level		Blood, AM Draw, Collection: T+2;0330, once	
<input checked="" type="checkbox"/> Phosphate Level		Blood, AM Draw, Collection: T+2;0330, once	
<input checked="" type="checkbox"/> Alkaline Phosphatase		Blood, AM Draw, Collection: T+2;0330, once	
<input checked="" type="checkbox"/> Alanine Aminotransferase		Blood, AM Draw, Collection: T+2;0330, once	
<input checked="" type="checkbox"/> Bilirubin Total		Blood, AM Draw, Collection: T+2;0330, once	
<input checked="" type="checkbox"/> Lactate Dehydrogenase		Blood, AM Draw, Collection: T+2;0330, once	
<input checked="" type="checkbox"/> Albumin Level		Blood, AM Draw, Collection: T+2;0330, once	

- **Added a second yellow CDS note:** *Prior to treatment on Day 5:*
  - **Added** required Day 5 labs from pretreatment phase.
  - **Updated** order sentences to: *Blood, AM Draw, Collection: T+4;0330, once.*

Prior to treatment on Day 5:			
<input checked="" type="checkbox"/> CBC and Differential		Blood, AM Draw, Collection: T+4;0330, once	
<input checked="" type="checkbox"/> Creatinine and Estimated GFR		Blood, AM Draw, Collection: T+4;0330, once	
<input checked="" type="checkbox"/> Sodium and Potassium Panel (Electrolytes Panel Outp...		Blood, AM Draw, Collection: T+4;0330, once	
<input checked="" type="checkbox"/> Calcium Level		Blood, AM Draw, Collection: T+4;0330, once	
<input checked="" type="checkbox"/> Magnesium Level		Blood, AM Draw, Collection: T+4;0330, once	
<input checked="" type="checkbox"/> Phosphate Level		Blood, AM Draw, Collection: T+4;0330, once	
<input checked="" type="checkbox"/> Alkaline Phosphatase		Blood, AM Draw, Collection: T+4;0330, once	
<input checked="" type="checkbox"/> Alanine Aminotransferase		Blood, AM Draw, Collection: T+4;0330, once	
<input checked="" type="checkbox"/> Bilirubin Total		Blood, AM Draw, Collection: T+4;0330, once	
<input checked="" type="checkbox"/> Lactate Dehydrogenase		Blood, AM Draw, Collection: T+4;0330, once	
<input checked="" type="checkbox"/> Albumin Level		Blood, AM Draw, Collection: T+4;0330, once	

- **Updated** "if clinically indicated" yellow CDS note: *If additional laboratory monitoring required between treatments.*



If additional laboratory monitoring required between treatments:



## Chemotherapy Phase:

- Added pre-chemo metrics:

Pre-Chemo Metrics
May proceed with treatment if no signs or symptoms of CRS or ICANS
May proceed with treatment on Day 1 if:
Neutrophils Greater Than or Equal to $0.5 \times 10^9/L$ within 48 hours
Platelet Count Greater Than or Equal to $25 \times 10^9/L$ within 48 hours (without bleeding)
May proceed with treatment on Day 3 and Day 5 if:
Neutrophils Greater Than or Equal to $0.5 \times 10^9/L$ within 24 hours
Platelet Count Greater Than or Equal to $25 \times 10^9/L$ within 24 hours (without bleeding)

- Added a turquoise CDS note below zero time order: *Insert saline lock prior to first treatment.*

Insert saline lock prior to first treatment

- Updated Vitals Signs turquoise CDS note to include: *...according to SCCRS or SCICANS protocol.*

Vital signs before each treatment then routinely per hospital policy. If there is a drop in blood pressure or clinical evidence of CRS or ICANS, notify physician immediately and continue to monitor vital signs according to SCCRS or SCICANS protocol

- Updated turquoise CDS note: *Patient must be monitored in inpatient setting for a minimum of 48 hours after each dose.*

Patient must be monitored in inpatient setting for a minimum of 48 hours after each dose

- Removed vital sign monitoring requirements from order comments of teclistamab.

<input checked="" type="checkbox"/>	teclistamab (teclistamab - oncology) 0.06 mg/kg, subcutaneous, once oncology, drug form: inj Doses greater than 2 mL should be divided into separate syringes and administered at different sites. Patients to be monitored for at least 48 hours after dosing. Day 1
<input checked="" type="checkbox"/>	teclistamab (teclistamab - oncology) 0.3 mg/kg, subcutaneous, once oncology, drug form: inj Doses greater than 2 mL should be divided into separate syringes and administered at different sites. Patients to be monitored for at least 48 hours after dosing. Day 3
<input checked="" type="checkbox"/>	teclistamab (teclistamab - oncology) 1.5 mg/kg, subcutaneous, once oncology, drug form: inj Doses greater than 2 mL should be divided into separate syringes and administered at different sites. Patients to be monitored for at least 48 hours after dosing. Day 5




### Chemotherapy Related Orders Phase:

- **Removed Yellow CDS note:** *Consider alternative agent if allergic to fluoroquinolones.*
- **Removed** *continue for 3 months* from doxycycline order comment.
- **Removed** *continue for 4 weeks following end of treatment* from valacyclovir order comment.
- **Removed** *continue for a minimum of 6 months* from sulfamethazole-trimethoprim order comment.
- **Removed yellow CDS note:** *If neutrophils less than  $1.0 \times 10^9$ .*
- **Removed** filgrastim order.
- **Removed** vital signs nursing order.

	Component	Status	Dose	Details
	ONCP MY UMYTEC teclistamab (Inpatient) Cycle 1 - Cycle 1	Chemotherapy Related Orders (Future Pending)		
	Supportive Care Medications			
<input checked="" type="checkbox"/>	doxycycline		200 mg, PO, qdaily, drug form: tab	
<input checked="" type="checkbox"/>	valACYclovir		500 mg, PO, qdaily, drug form: tab, start: T;0800	
<input checked="" type="checkbox"/>	sulfamethoxazole-trimethoprim (cotrimoxazole DS 80...		160 mg, PO, qMonWedFri, drug form: tab	
	If HBsAg or HBcoreAb positive, start entecavir			
<input type="checkbox"/>	entecavir		0.5 mg, PO, qdaily, drug form: tab	

### Scheduling Phase:


- **Added a yellow CDS note:** *Go to Chemo Calendar to send next cycle to scheduling wait list.*

 Go to Chemo Calendar to send next cycle to scheduling wait list

### ONCP MY UMY0UF teclistamab (Outpatient) Cycle 1:

#### Chemotherapy Phase:



- **Update yellow CDS note:** *Per physician's clinical judgement, physician to ensure adequate antimicrobial prophylaxis.*

 Per physician's clinical judgement, physician to ensure adequate antimicrobial prophylaxis


### ONCP MY UMY0UF teclistamab Cycles 2+:

#### Chemotherapy Phase:


- **Updated** platelet pre-chemo metric to include: *(without bleeding).*

 Neutrophils Greater Than or Equal to  $0.5 \times 10^9/L$  within 48 hours  
 Platelet Count Greater Than or Equal to  $25 \times 10^9/L$  (without bleeding) within 48 hours


- **Added a yellow CDS note** directly below Pre-Chemo Metrics header: *May proceed with treatment if no signs or symptoms or CRS or ICANS.*

 May proceed with treatment if no signs or symptoms or CRS or ICANS


- **Added a yellow CDS note** above loratadine pre-med: *If CRS with prior dose, or when resuming treatment after treatment interruption:.*

 If CRS with prior dose, or when resuming treatment after treatment interruption:


- **Deselected** loratadine pre-med.

☐  loratadine  
20 mg, PO, once oncology, drug form: tab, Use Patient Supply  
60 minutes prior to treatment. Days 1, 8, 15, 22

- **Removed yellow CDS note** above dexamethasone: *if clinically indicated.*
- **Updated first Vital Signs turquoise CDS note:** *Vital signs prior to treatment and 15 minutes post-injection.*

 Vital signs prior to treatment and 15 minutes post-injection

- **Removed turquoise CDS note:** *Observation and vital signs as per Cycle 1 requirements if patients restarting with [...].*
- **Removed** vital signs and observation comments from teclistamab order comment.

☒  teclistamab (teclistamab - oncology)  
1.5 mg/kg, subcutaneous, once oncology, drug form: inj  
Doses greater than 2 mL should be divided into separate syringes and administered at different sites. Days 1, 8, 15, 22

Versioning: Y

Jira: CST-317067

Protocols: BRAVSG

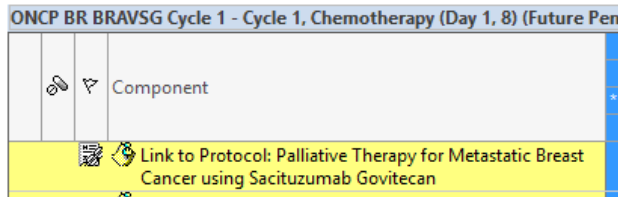
Cycles/PowerPlans: All Associated PowerPlans and Regimens

Changes:



Updated the Regimen Description and Link to Protocol note to remove Triple Negative:

- Palliative Therapy for Metastatic Breast Cancer using Sacituzumab Govitecan.



**Versioning:** Y

**Jira:** CST-317062

## Net New Protocols

- ONC SM SMNAIPNI
- ONCP SM SMNAIPNI Pretreatment Plan
- ONCP SM SMNAIPNI
- ONC GU UGUPLVT
- ONCP GU UGUPLVT Pretreatment Plan
- ONCP GU UGUPLVT

**Jira:** CST-305778 and CST-314892

Jira Ticket #	CST-317067, CST-317062, CST-314892, CST-305778
How-to questions?	<a href="http://cstcernerhelp.healthcarebc.ca">http://cstcernerhelp.healthcarebc.ca</a>
Need further support?	CST Phone Support: 1-844-214-7444