CST Bulletin – December, 2025

BC Cancer ST Program Updates for December 2025

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

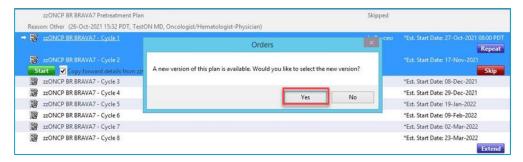
What has Changed?

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 (SB).

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 premed, 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: GUPADT Cycles/PowerPlans: ONCP GU GUPADT Pretreatment Plan Changes: Unselected PSA - Known/Suspected Prostate Cancer and Testosterone Level orders and moved down to If clinically indicated. Oncology % 🚫 🕂 Add to Phase 🕶 🖳 Comments ONCP GU GUPADT Pretreatment Plan NCP GU GUPADT Pretreatment Plan, Baseline Labs (Day 1) (Future Pending) *Est. 05-Nov-2025 08:00 PST - 1 Days ☐ Baseline Labs (Day 1) (Future Pending) ☆ Diagnostics (Future Pending) O. Ambulatory Component 🐧 If clinically indicated: Suggested Plans (0) PSA - Known/Suspected Prostate Cancer Orders ood, once, Order for future visit Admit/Transfer/Discharge Testosterone Level Status Blood, once, Order for future visit Patient Care Sodium Level Activity Blood, once, Order for future visit Diet/Nutrition Potassium Level Continuous Infusions Blood, once, Order for future visit **Medications** Calcium Level Blood Products Blood, once, Order for future visit Magnesium Level ■ Laboratory Diagnostic Tests Blood, once, Order for future visit Procedures Versioning: No

Protocols: GUBPWRT

Cycles/PowerPlans: ONCP GU GUBPWRT Concurrent

Changes:

Jira: CST-342517

- Pre-Chemo Metric window updated from 'within 24 hours' to 'within 48 hours'.
- Lab Phase offset updated from '6 days' to '5 days'.

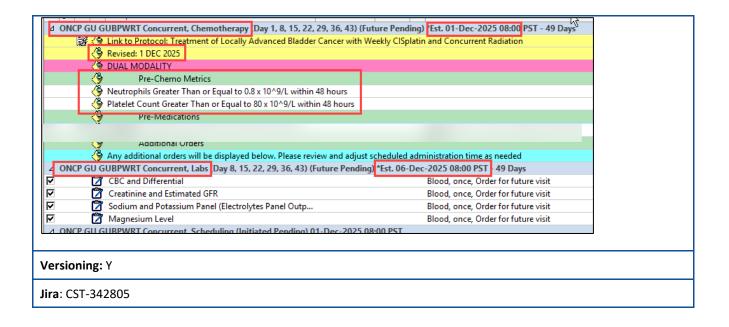






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Protocols: GIPAVCAP and GIGECC

Cycles/PowerPlans: All associated PowerPlans and Regimen

Changes:

All PowerPlans and Regimens associated with GIPAVCAP and GIGECC protocols have been inactivated.

Versioning: No

Jira: CST-344890

Protocols: LYEPOCHR

Cycles/PowerPlans: ONCP LY LYEPOCHR (Outpatient)

Changes Chemotherapy Phase:

• **Updated Teal CDS note:** If cyclophosphamide dose is greater than 2000mg, perform urine dipstick prior to **each** infusion bag change on Days 1 to 4 and if positive for blood, notify MD and send urine sample for urinalysis for verification and accurate determination of hematuria.

(§ If cyclophosphamide dose is greater than 2000mg, perform urine dipstick prior to each infusion bag change on Days 1 to 4 and if positive for blood, notify MD and send urine sample for urinalysis for verification and accurate determination of hematuria

Added new Teal CDS note: CADD Solis VIP pump infusion rate selection: 23 mL/hour for 500 mL bag or 44 mL/hour for 1000 mL bag.







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• Added new Teal CDS note: When ANC recovers to 5.0 x 10^9/L past the nadir, RN or pharmacist to advise patient to discontinue filgrastim.

GADD Solis VIP pump infusion rate selection: 23 mL/hour for 500 mL bag or 44 mL/hour for 1000 mL bag				
☑	Communication Order	RN to disconnect infusion bag and pump on Day 5. Do not deselect or modify		
	♦ When ANC recovers to 5.0 x 10^9/L past the nadir, RN or pharmacist to advise patient to discontinue filgrastim			

Changes Intrathecal Chemotherapy Phase:

Removed the linked component from all CSF Labs so that the labs can be ordered individually.

	Cell Count CSF (CSF Cell Count and Differential)	Cerebrospinal fluid, Routine, Unit collect, Collection: T;N, once
	Protein CSF (CSF Total Protein)	Cerebrospinal fluid, Routine, Unit collect, Collection: T;N, once
	Glucose CSF	Cerebrospinal fluid, Routine, Unit collect, Collection: T;N, once
	Pathology Cytology Request (Pathology Cytology Request Other)	AP Specimen
	Request Other)	CSF Pathology
	Immunophenotyping LPD (Immunophenotyping (Flo	Cerebrospinal fluid, Routine, Unit collect, Collection: T;N, once
	CSF Culture (CSF C&S)	Cerebrospinal fluid, once, Order for future visit

Versioning: Yes

Jira: CST-344538

Net New Protocols:

Net New Protocols:

- ONC LY LYAVDNIV
- ONC LY LYAVDNIV Etoposide Cardiac Dysfunction Option
- ONC LY LYAVDNIV Cyclophosphamide Hyperbilirubinemia Option
- ONCP LY LYAVDNIV Pretreatment Plan
- ONCP LY LYAVDNIV DOXOrubicin Option
- ONCP LY LYAVDNIV etoposide Option
- ONCP LY LYAVDNIV Cyclophosphamide Hyperbilirubinemia Option
- ONC GU GUBMITCART
- ONCP GU GUBMITCART Pretreatment Plan
- ONCP GU GUBMITCART
- ONC GU GUBMITFURT
- ONCP GU GUBMITFURT Pretreatment Plan
- ONCP GU GUBMITFURT Concurrent
- ONC GU GUBGRT Concurrent
- ONCP GU GUBGRT Pretreatment Plan
- ONCP GU GUBGRT Concurrent

Jira: CST-342827, CST-342812, CST-342811, CST-342558







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Jira Ticket #	CST-344890, CST-344538, CST-342827, CST-342812, CST-342811, CST-342805, CST-342558, CST-342517
How-to questions?	http://cstcernerhelp.healthcarebc.ca
Need further support?	CST Cerner Phone Support: 1-844-214-7444





