

Regimen Reference Order – BRST – FEC-D

ARIA: BRST – [FEC-D]

Planned Course: Every 21 days for 6 cycles (Cycles 1 to 3 FEC-100, Cycles 4 to 6 DOCEtaxel)

Indication for Use: Breast Cancer Adjuvant

CVAD: Preferred (VESICANT INVOLVED)

Proceed with treatment if:

ANC equal to or greater than $1 \times 10^9/L$ AND Platelets equal to or greater than $100 \times 10^9/L$

❖ Contact Physician if parameters not met

SEQUENCE OF MEDICATION ADMINISTRATION

Pre-treatment Requirements

Drug	Dose	CCMB Administration Guideline
Cycles 1 to 3 – FEC		
Instruct patient to start vigorous oral pre-hydration (600-900 mL) the morning of cyclophosphamide treatment (Self-administered at home)		
Cycles 4 to 6 – DOCEtaxel		
dexamethasone	8 mg	Orally twice daily the day before DOCEtaxel treatment and one dose the morning of DOCEtaxel treatment (Self-administered at home)

Treatment Regimen – BRST – FEC-D

Establish primary solution 500 mL of: normal saline		
Drug	Dose	CCMB Administration Guideline
Cycles 1 to 3 – FEC		
aprepitant	125 mg	Orally 1 hour pre-chemotherapy
dexamethasone	12 mg	Orally 30 minutes pre-chemotherapy
ondansetron	16 mg	Orally 30 minutes pre-chemotherapy
OLANzapine	2.5 mg	Orally 30 minutes pre-chemotherapy
epiRUBicin	$100 \text{ mg}/\text{m}^2$	IV Push over 10 to 15 minutes
fluorouracil	$500 \text{ mg}/\text{m}^2$	IV Push over 3 to 5 minutes
cyclophosphamide	$500 \text{ mg}/\text{m}^2$	IV in normal saline 250 mL over 1 hour

Cycles 4 to 6 – DOCEtaxel		
Drug	Dose	CCMB Administration Guideline
DOCEtaxel	100 mg/m ²	IV in normal saline 250 mL over 1 hour <i>Use non-DEHP bags and non-DEHP administration sets</i>
normal saline	100 mL	ONLY for patients with a PORT IV over 12 minutes <i>*Nursing Alert: This volume is to be administered after standard flush</i>

In the event of an infusion-related hypersensitivity reaction, refer to the 'Hypersensitivity Reaction Standing Order'

REQUIRED MONITORING

Cardiac monitoring

- Left Ventricular Ejection Fraction (LVEF) monitoring recommended at baseline and as clinically indicated

All Cycles

- CBC, biochemistry and liver enzymes as per Physician Orders

Cycles 4 to 6

- Full vital signs (temperature, heart rate, respiratory rate, blood pressure and O₂ saturation) at baseline and as clinically indicated
- No observation period required after DOCEtaxel administration. Patient can be discharged from treatment room if stable whether they had a reaction or not

Recommended Support Medications

Drug	Dose	CCMB Administration Guideline
Cycles 1 to 3 – FEC		
aprepitant	80 mg	Orally once daily on Days 2 and 3
dexamethasone	8 mg	Orally once daily on Days 2, 3 and 4
OLANzapine	2.5 mg	Orally the evening of Day 1 then twice daily on Days 2, 3 and 4. Also use OLANzapine 2.5 to 5 mg AS NEEDED for breakthrough nausea and vomiting (including Days 1 to 4) up to maximum of 10 mg per day. Contact clinic if nausea/vomiting is not adequately controlled
Cycles 4 to 6 – DOCEtaxel		
Drug	Dose	CCMB Administration Guideline
metoclopramide	10 – 20 mg	Orally every 4 hours as needed for nausea and vomiting

DISCHARGE INSTRUCTIONS

All Cycles

- Instruct patient to continue taking anti-emetic(s) at home
- Reinforce applicable safe handling precautions of medications, blood and body fluids for 48 hours after completion of chemotherapy

Cycles 1 to 3 (FEC)

- Instruct patient to:
 - Maintain oral intake of 2000 mL (8 glasses) of fluid daily at home
 - Empty bladder every 2 hours while awake and at bedtime for 24 hours
 - Obtain immediate assistance as per your clinic's contact instructions if:
 - Symptoms of hemorrhagic cystitis (e.g. dysuria, hematuria)
 - Unable to drink recommended amount of fluid

Cycles 4 to 6 (DOCEtaxel)

- Patients should be instructed to contact their cancer team immediately if symptoms of hypersensitivity reactions occur after discharge

ADDITIONAL INFORMATION

- Not applicable