

Regimen Reference Order

BRST – PERTuzumab + trastuzumab + DOCETaxel

ARIA: BRST – [PERTuz + tras + DOCETaxel]

BRST – [PERTuzumab + trastuzumab – Phase 2]

Planned Course: PERTuzumab + trastuzumab + DOCETaxel every 21 days for 6 to 8 cycles, followed by PERTuzumab + trastuzumab every 21 days until disease progression or unacceptable toxicity

Indication for use: Breast Cancer Metastatic HER2 positive

CVAD: At Provider’s Discretion

Proceed with treatment if:

PERTuzumab + trastuzumab + DOCETaxel

- *ANC equal to or greater than $1.5 \times 10^9/L$ AND Platelets equal to or greater than $100 \times 10^9/L$*

PERTuzumab + trastuzumab (Phase 2)

- *Blood work at provider’s discretion: not required to proceed with treatment*

❖ **Contact Physician if parameters not met**

SEQUENCE OF MEDICATION ADMINISTRATION

Pre-treatment Requirements

Drug	Dose	CCMB Administration Guideline
dexamethasone	8 mg	Orally twice a day the day before DOCETaxel treatment and one dose the morning of DOCETaxel treatment (Self-administered at home)

Treatment Regimen: BRST – PERTuzumab + trastuzumab + DOCETaxel

Establish primary solution 500 mL of: normal saline		
Drug	Dose	CCMB Administration Guideline
PERTuzumab + trastuzumab + DOCETaxel		
Cycle 1		
Day 1		
PERTuzumab	840 mg Loading Dose	IV in normal saline 250 mL over 60 minutes
Day 2		
trastuzumab (brand name specific)	8 mg/kg Loading Dose	IV in normal saline 250 mL over 90 minutes <i>*Alert: Ensure brand name on prescription label (indicated in brackets on prescription label) matches prescribed order</i> <i>*Nursing Alert: DOCETaxel infusion begins after observation period is complete</i>

DOCETaxel	75 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>
Cycles 2 to 8		
PERTuzumab	420 mg	IV in normal saline 250 mL over 30 minutes
trastuzumab (brand name specific)	6 mg/kg	IV in normal saline 250 mL over 30 minutes <i>*Alert: Ensure brand name on prescription label (indicated in brackets on prescription label) matches prescribed order</i>
DOCETaxel	75 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>
Phase 2 PERTuzumab + trastuzumab (1 cycle = 84 days)		
PERTuzumab	420 mg	IV in normal saline 250 mL over 30 minutes on Days 1, 22, 43 and 64
trastuzumab (brand name specific)	6 mg/kg	IV in normal saline 250 mL over 30 minutes on Days 1, 22, 43 and 64 <i>*Alert: Ensure brand name on prescription label (indicated in brackets on prescription label) matches prescribed order</i>
All doses will be automatically rounded that fall within the DSG Approved Dose Bands. See BRST DSG – Dose Banding document for more information		

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
 - every 4 cycles for the first 2 years, then
 - every 4 to 8 cycles thereafter

Every cycle PERTuzumab, trastuzumab and DOCETaxel

- CBC, biochemistry and liver enzymes as per Physician Orders

Cycle 1 Day 1 Only

- Full vital signs (temperature, heart rate, respiratory rate, blood pressure and O₂ saturation) at baseline and as clinically indicated
- Observe patient for 1 hour after PERTuzumab administration. Full vital signs prior to discharge

Cycle 1, Day 2 Only

- Full vital signs (temperature, heart rate, respiratory rate, blood pressure and O₂ saturation) at baseline and as clinically indicated
- Observe patient for 30 minutes after trastuzumab administration. DOCEtaxel infusion begins after observation period is complete
- No observation period required after DOCEtaxel administration. Patient can be discharged from treatment room if stable whether they had a reaction or not

Cycles 2 and Onwards

- Full vital signs (temperature, heart rate, respiratory rate, blood pressure and O₂ saturation) at baseline and as clinically indicated
- No observation period required after PERTuzumab, trastuzumab or 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
metoclopramide	10 – 20 mg	Orally every 4 hours as needed for nausea and vomiting

DISCHARGE INSTRUCTIONS

- Instruct patient to continue taking anti-emetic(s) at home
- Patients should be instructed to contact their cancer team immediately if symptoms of hypersensitivity reactions occur after discharge
- Reinforce applicable safe handling precautions of medications, blood and body fluids for 48 hours after completion of chemotherapy

ADDITIONAL INFORMATION

- trastuzumab is available from more than one manufacturer and uses several different brand names. Brand name will be indicated in brackets after trastuzumab. **Ensure prescription label matches the brand name on prescribed order**
- After completion of DOCEtaxel, patients can continue on PERTuzumab plus trastuzumab alone; prescribers will use the **BRST – [PERTuzumab + trastuzumab – Phase 2]** regimen when DOCEtaxel is complete