Regimen Reference Order – BRST– TC + trastuzumab

ARIA: BRST - [TC + trastuzumab]

Planned Course: TC + trastuzumab every 21 days for 4 cycles, followed by trastuzumab every 21 days for 14 cycles

Indication for Use: Breast Cancer Adjuvant; HER2 positive

CVAD: At provider's discretion

Proceed with treatment if:

Cycles 1 to 4

• ANC equal to or greater than 1×10^9 /L AND Platelets equal to or greater than 100×10^9 /L Cycle 5 (trastuzumab)

• 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		
Cycles 1 to 4 – TC a	nd trastuzumab			
Instruct patient to sta (Self-administered at	•	tion (600-900 mL) the morning of cyclophosphamide treatment		
dexamethasone	8 mg	Orally twice daily the day before DOCEtaxel treatment and one dose the morning of DOCEtaxel treatment		
		(Self-administered at home) *Nursing Alert: Notify physician if patient has not taken dexamethasone. dexamethasone is prescribed to prevent infusion reactions		

Treatment Regimen – BRST – TC + trastuzumab					
Establish primary solution 500 mL of: normal saline					
Drug	Dose	CCMB Administration Guideline			
Cycles 1 to 4 – TC and	l trastuzumab				
trastuzumab (brand name specific)	Cycle 1 8 mg/kg Loading Dose	IV in normal saline 250 mL over 90 minutes *Alert: Ensure brand name on prescription label (indicated in brackets on prescription label) matches prescribed order *Nursing Alert: DOCEtaxel infusion begins after observation period is complete			
	Cycles 2 to 4 6 mg/kg	IV in normal saline 250 mL over 30 minutes *Alert: Ensure brand name on prescription label (indicated in brackets on prescription label) matches prescribed order			
ondansetron	16 mg	Orally 30 minutes pre-chemotherapy			



dexamethasone	4 mg	Orally 30 minutes pre-chemotherapy *Nursing Alert: this dose is in addition to the 8 mg self- administered dose taken at home morning of Day 1
DOCEtaxel	75 mg/m ²	IV in normal saline 250 mL over 1 hour, following the administration rates below:
		 Administer at 100 mL/hour for 15 minutes, then Administer at 100 mL/hour for 15 minutes, then
		 Administer at 100 mL/nod 101 15 minutes, then Administer remaining volume over 45 minutes
		Use non-DEHP bags and non-DEHP administration sets
		OR
normal saline	100 mL	 For 500 mL bags (when Pharmacy must prepare DOCEtaxel in 500 mL normal saline for concentration-dependent stability): IV in normal saline 500 mL over 1 hour, following the administration rates below: Administer at 200 mL/hour for 15 minutes, then Administer remaining volume over 45 minutes Use non-DEHP bags and non-DEHP administration sets ONLY for patients with a PORT IV over 12 minutes *Nursing Alert: This volume is to be administered after standard flush
cyclophosphamide	600 mg/m ²	IV in normal saline 250 mL over 1 hour
Cycle 5 – trastuzuma	-	
trastuzumab (brand	6 mg/kg	IV in normal saline 250 mL over 30 minutes every 21 days for 14
name specific)	פיי /פייי >	doses
		*Alert: Ensure brand name on prescription label (indicated in brackets on prescription label) matches prescribed order

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) at baseline and every 4 cycles (i.e. 12 weeks) as per Physician Orders

Cycles 1 to 4

• CBC, biochemistry and liver enzymes as per Physician Orders

Cycle 1 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 infusion. Full vital signs after observation period is complete. 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

ADULT

Cycles 2 to 4

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

Cycles 5 to 18

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

Drug	Dose	CCMB Administration Guideline
Cycles 1 to 4 ONLY – TC a	nd trastuzumab	
pegfilgrastim (brand name specific) (See Filgrastim Clinical Guide)	6 mg	Subcutaneous once on Day 3 *Alert: pegfilgrastim to be given as a single dose once per chemotherapy cycle no sooner than 24 hours after chemotherapy
dexamethasone	8 mg	Orally once daily on Days 2 and 3
metoclopramide	10-20 mg	Orally every 4 hours as needed for nausea and vomiting
Cycle 5 – trastuzumab		
	N	one required

Recommended Support Medications

DISCHARGE INSTRUCTIONS

All Cycles

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

Cycles 1 to 4 (TC and trastuzumab)

- Ensure patient receives pegfilgrastim supply if patient is self-administering at home
- Instruct patient to:

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

ADDITIONAL INFORMATION

- Reassess trastuzumab dose with significant weight changes
- 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
- Note: At Cycle 4, an entry called "*Physician Reminder Order remaining trastuzumab 1 Units Insert Miscellaneous once*" will appear in the electronic drug order. No action is required. This prompt is to remind the prescriber to order single agent trastuzumab which begins at Cycle 5