

Regimen Reference Order – GENU – modified TIP (penile cancer)

ARIA: GENU – [modified TIP]

Planned Course: Every 21 days for 4 cycles

Indication for Use: Penile cancer

CVAD: At Provider's Discretion

Proceed with treatment if:

- ANC equal to or greater than $1.5 \times 10^9/L$ AND Platelets equal to or greater than $100 \times 10^9/L$
 - Creatine clearance greater than 45 mL/min
- ❖ **DO NOT DELAY OR CANCEL THERAPY WITHOUT CONSULTING MEDICAL ONCOLOGIST**

SEQUENCE OF MEDICATION ADMINISTRATION

Pre-treatment Requirements

Drug	Dose	CCMB Administration Guideline
Not Applicable		

Treatment Regimen – GENU – modified TIP (penile cancer)

Establish primary solution 500 mL of: normal saline

Drug	Dose	CCMB Administration Guideline
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Day 1

cetirizine	20 mg	Orally 1 hour prior to PACLitaxel
dexamethasone	20 mg	IV in normal saline 50 mL over 15 minutes 1 hour prior to PACLitaxel <i>*Nursing Alert: PACLitaxel starts 1 hour after completion of dexamethasone infusion</i>

Wait 1 hour after completion of IV pre-medication(s) before starting PACLitaxel

PACLitaxel	175 mg/m ²	IV in normal saline 500 mL over 3 hours, following the administration rates below: <ul style="list-style-type: none"> • Administer at 100 mL/hour for 15 minutes, then • Administer remaining volume over 2 hours and 45 minutes Use non-DEHP bags and non-DEHP administration sets with 0.2 or 0.22 micron filter <i>*Nursing Alert: Gently invert bag 8 to 10 times immediately prior to administration of PACLitaxel to evenly distribute the drug</i>
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Days 2, 3 and 4		
magnesium sulfate	1 g	IV in normal saline 500 mL over 1 hour (Pre hydration)
aprepitant	<u>Day 2:</u> 125 mg	Orally 1 hour prior to chemotherapy
	<u>Days 3 and 4:</u> 80 mg	
ondansetron	16 mg	Orally 30 minutes prior to chemotherapy
dexamethasone	12 mg	Orally 30 minutes prior to chemotherapy
OLANzapine	2.5 mg	Orally 30 minutes prior to chemotherapy
mesna	240 mg/m ²	IV in normal saline 50 mL over 15 minutes Immediately prior to ifosfamide
ifosfamide	1200 mg/m ²	IV in normal saline 250 mL over 1 hour <i>*Alert: start of ifosfamide infusion will be considered "Hour 0"</i>
CISplatin	25 mg/m ²	IV in normal saline 250 mL over 1 hour starting at "Hour 1"
normal saline	500 mL	IV over 2 hours (Post hydration) starting at "Hour 2"
mesna	240 mg/m ²	IV in normal saline 50mL over 15 minutes at "Hour 4"
mesna	480 mg/m ²	Orally with juice or soft drink at "Hour 6" (Self-administered at home) <i>*Nursing Alert: Inform patient time to take dose</i>

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

REQUIRED MONITORING

All Cycles

Day 1

- CBC, creatinine, urea, electrolytes, liver enzymes and glucose as per Physician Orders

Days 2, 3 and 4

- Baseline blood pressure prior to magnesium infusion and repeat 15 minutes after start of magnesium infusion

Recommended Support Medications

Drug	Dose	CCMB Administration Guideline
pegfilgrastim (brand name specific) (See Filgrastim Clinical Guide)	6 mg	Subcutaneous once on Day 5 <i>*Alert: pegfilgrastim to be given as a single dose once per chemotherapy cycle no sooner than 24 hours after chemotherapy</i>
aprepitant	80 mg	Orally once daily on Days 5 and 6
dexamethasone	8 mg	Orally once daily on Days 5 and 6
OLANzapine	2.5 mg	Orally the evenings of Days 2, 3 and 4 then twice daily on Days 5 and 6. Also use OLANzapine 2.5 to 5 mg AS NEEDED for breakthrough nausea and vomiting (including Days 2 to 6) up to a maximum of 10 mg per day. Contact clinic if nausea/vomiting is not adequately controlled

DISCHARGE INSTRUCTIONS

- Patients should be instructed to contact their cancer team immediately if symptoms of hypersensitivity reactions occur after discharge (PACLitaxel)
- Instruct patient to:
 - continue taking anti-emetic(s) at home
 - Self-administer “Hour 6” of mesna by mixing the contents of the mesna syringe in juice (not grapefruit) or soft drink. If patient vomits within 2 hours of taking “Hour 6” mesna, they should be advised to contact their cancer team. Patient may require intravenous hydration
 - Report changes in mental status; ifosfamide can cause encephalopathy (rare)
 - 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 after each dose of ifosfamide
 - 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

- PACLitaxel may cause progressive, irreversible neuropathy
- CISplatin is ototoxic and nephrotoxic
- CISplatin can cause hypomagnesemia