Regimen Reference Order GYNE – bevacizumab + PACLitaxel + CARBOplatin (cervix)

ARIA: GYNE – [bev + PACL + CARBO (Cervix)]

Planned Course:Every 21 days until disease progression or unacceptable toxicityIndication for Use:Cervix Cancer Recurrent

CVAD: At Provider's Discretion

Proceed with treatment if:

Cycle 1

• ANC equal to or greater than 1.5×10^9 /L AND Platelets equal to or greater than 100×10^9 /L Cycle 2 and onwards

- ANC equal to or greater than 1.2×10^9 /L AND Platelets equal to or greater than 75 x 10^9 /L
 - Contact Physician if parameters not met

SEQUENCE OF MEDICATION ADMINISTRATION

	Pre-treat	tment Requirements
Drug	Dose	CCMB Administration Guideline
		Not Applicable

Treatment Regi	men – GYNE – I	bevacizumab + PACLitaxel + CARBOplatin (cervix)
Establish primary soluti	on 500 mL of: normal	saline
Drug	Dose	CCMB Administration Guideline
bevacizumab (brand name specific)	15 mg/kg	IV in normal saline 100 mL over 30 minutes *Alert: Ensure brand name on prescription label (indicated in brackets on prescription label) matches prescribed order
cetirizine	20 mg	Orally 1 hour prior to PACLitaxel
aprepitant	125 mg	Orally 1 hour prior to PACLitaxel
ondansetron	16 mg	Orally 30 minutes pre-chemotherapy
dexamethasone	20 mg	IV in normal saline 50 mL over 15 minutes <u>1 hour</u> prior to PACLitaxel *Nursing Alert: PACLitaxel starts 1 hour after completion of dexamethasone infusion
Wait 1 hour after comp	letion of IV pre-medio	cation(s) before starting PACLitaxel
PACLitaxel	175 mg/m ²	 IV in normal saline 500 mL over 3 hours, following the administration rates below: Administer at 100 mL/hour for 15 minutes, then Administer remaining volume over 2 hours and 45 minutes



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		Use non-DEHP bags and non-DEHP administration sets with 0.2 or 0.22 micron filter *Nursing Alert: Gently invert bag 8 to 10 times immediately prior to administration to PACLitaxel to evenly distribute the drug
CARBOplatin	AUC 6 mg/mL.min; maximum dose 900 mg (see table below)	IV in D5W 250 mL over 30 minutes
All doses will be auto more information	omatically rounded that fall v	vithin CCMB Approved Dose Bands. See Dose Banding document for

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

REQUIRED MONITORING

All Cycles

- CBC, serum creatinine, urea, liver enzymes, urine protein and blood pressure as per Physician Orders
 - Urinalysis for protein: Where urinalysis is not possible, use dipstick. If lab urinalysis for protein is greater than or equal to 1 g/L or dipstick proteinuria shows 2+ or 3+, notify prescriber
- Full vital signs (temperature, heart rate, respiratory rate, blood pressure and O₂ saturation) at baseline and as clinically indicated
- No observation period is required after bevacizumab or PACLitaxel administration. Patient can be discharged from treatment room if stable whether they had a reaction or not

Drug	Dose	CCMB Administration Guideline
prepitant	80 mg	Orally once daily on Days 2 and 3
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

Recommended Support Medications

DISCHARGE INSTRUCTIONS

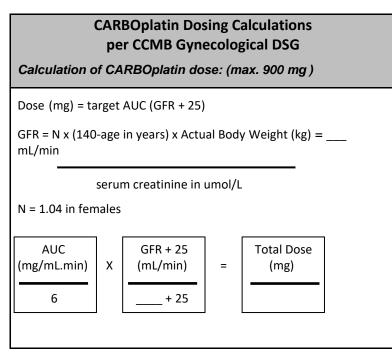
- Patients should be instructed to contact their cancer team immediately if symptoms of hypersensitivity reactions occur after discharge
- Instruct patient to continue taking anti-emetic(s) at home
- Reinforce applicable safe handling precautions of medications, blood and body fluids for 48 hours after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

ADDITIONAL INFORMATION

- bevacizumab can cause increased risk of hypertension, post-operative bleeding, would healing complications and thromboembolic events
- bevacizumab is available from more than one manufacturer and uses several different brand names. Brand name
 will be indicated in brackets after bevacizumab. Ensure prescription label matches the brand name on prescribed
 order
- PACLitaxel may cause progressive, irreversible neuropathy



- CARBOplatin dose considerations:
 - o CCMB Gynecological DSG uses actual body weight to calculate GFR
 - CCMB Gynecological DSG uses a maximum CARBOplatin dose of 900 mg
 - If calculated CARBOplatin dose differs more than 10% from prescribed CARBOplatin dose, contact the prescriber



AUC= Area Under Curve

The estimated creatinine clearance is based on limited evidence. Sound clinical judgment and interpretation of the estimation are required, because the equation may not be appropriate for some patient populations (for example, acute renal failure).

