Regimen Reference Order

GYNE – bevacizumab + pegylated liposomal DOXOrubicin

ARIA: GYNE - [bev + doxorubicin (peg-liposomal)]

Planned Course: Every 28 days until disease progression or unacceptable toxicity

Indication for Use: Ovarian Cancer Platinum-Resistant

CVAD: At Provider's Discretion

Proceed with treatment if:

Cycle 1

Day 1 only

ANC equal to or greater than 1.5 x $10^{9}/L$ AND Platelets equal to or greater than $100 \times 10^{9}/L$

Cycle 2 and Onwards

Day 1 only

ANC equal to or greater than 1.2 x $10^{9}/L$ AND Platelets equal to or greater than 75 x $10^{9}/L$

Contact Physician if parameters not met

SEQUENCE OF MEDICATION ADMINISTRATION

Pre-treatment Requirements				
Drug	Dose	CCMB Administration Guideline		
	N	lot Applicable		

Treatment Regimen – GYNE – bevacizumab + pegylated liposomal DOXOrubicin				
Drug	Dose	CCMB Administration Guideline		
Day 1				
Establish primary solution	on 500 mL of: normal sali	ne (bevacizumab incompatible with D5W)		
bevacizumab (brand name specific)	10 mg/kg	IV in normal saline 100 mL over 20 minutes *Alert: Ensure brand name on prescription label (indicated in brackets on prescription label) matches prescribed order		
Establish primary solution	on 500 mL of: D5W (pegy	vlated liposomal DOXOrubicin incompatible with normal saline)		
dexamethasone	8 mg	Orally 30 minutes pre-chemotherapy		
pegylated liposomal DOXOrubicin	40 mg/m ²	IV in D5W 250 mL over 90 minutes OR IV in D5W 500 mL over 2 hours if dose is greater than or equal to 90 mg (Maximum rate 1 mg/minute) If no reaction, subsequent doses may be administered over 60 minutes		



Updated: November 17, 2020

Establish primary solution 500 mL of: normal saline			
bevacizumab (brand name specific)	10 mg/kg	IV in normal saline 100 mL over 20 minutes *Alert: Ensure brand name on prescription label (indicated in brackets on prescription label) matches prescribed order	
All doses will be automated Banding document for r	•	fall within the DSG Approved Dose Bands. See GYNE DSG – Dose	

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

REQUIRED MONITORING

All Cycles

Day1

- CBC, serum creatinine, 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 after pegylated liposomal DOXOrubicin administration. Patient can be discharged from treatment room if stable whether they had a reaction or not

Day 15

- No blood work required on Day 15
- 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 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

- 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, wound 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**

