

Regimen Reference Order

H&N – CISplatin with concurrent radiation

ARIA: - H&N – [CISplatin + radiation]

Planned Course: Every 21 days for 3 cycles

Indication for Use: Squamous Cell Carcinoma Head and Neck

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 $100 \times 10^9/L$
- Creatinine clearance greater than 45 mL/minute
- ❖ Contact Physician if parameters not met

SEQUENCE OF MEDICATION ADMINISTRATION

Pre-treatment Requirements

Drug	Dose	CCMB Administration Guideline
Not Applicable		

Treatment Regimen – H&N – CISplatin with concurrent radiation

Establish primary solution 500 mL of: normal saline

Drug	Dose	CCMB Administration Guideline
Day 1		
magnesium sulfate	2 g	IV in normal saline 1000 mL over 2 hours (Pre hydration)
aprepitant	125 mg	Orally 1 hour pre-chemotherapy
ondansetron	16 mg	Orally 30 minutes pre-chemotherapy
dexamethasone	12 mg	Orally 30 minutes pre-chemotherapy
OLANzapine	2.5 mg	Orally 30 minutes pre-chemotherapy
CISplatin	100 mg/m ²	IV in normal saline 500 mL over 1 hour <i>*Alert: CISplatin infusion must be complete prior to mannitol administration</i>
mannitol	12.5 g	IV in normal saline 1000 mL over 2 hours (Post hydration)
Days 2 and 3		
normal saline	1000 mL	IV over 2 hours

Flush after each medication:

- 50 mL over 6 minutes (500 mL/hr)

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

REQUIRED MONITORING

All Cycles

- CBC, biochemistry, serum creatinine, urea, liver enzymes and electrolytes as per Physician Orders
- Baseline blood pressure prior to magnesium infusion and repeat 15 minutes after start of magnesium infusion

Recommended Support Medications

Drug	Dose	CCMB Administration Guideline
aprepitant	80 mg	Orally once daily on Days 2 and 3
dexamethasone	8 mg	Orally once daily on Days 2, 3 and 4
OLANzapine	2.5 mg	Orally the evening of Day 1 then twice daily on Days 2, 3 and 4. Also use OLANzapine 2.5 to 5 mg AS NEEDED for breakthrough nausea and vomiting (including Days 1 to 4) up to maximum of 10 mg per day. Contact clinic if nausea/vomiting is not adequately controlled

DISCHARGE INSTRUCTIONS

- Instruct patient to continue taking anti-emetic(s) at home
- Notify clinic if having significant diarrhea or vomiting
- Reinforce applicable safe handling precautions of medications, blood and body fluids for 48 hours after completion of chemotherapy

ADDITIONAL INFORMATION

- CISplatin is ototoxic and nephrotoxic
- CISplatin can cause hypomagnesemia