ADULT Updated: January 12, 2022

Regimen Reference Order – SARC – DOXOrubicin

ARIA: - SARC - [DOXOrubicin]

Planned Course: Every 21 days for 6 to 8 cycles

Indication for Use: Sarcoma

CVAD: Preferred (VESICANT INVOLVED)

Proceed with treatment if:

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

Contact Physician if parameters not met

SEQUENCE OF MEDICATION ADMINISTRATION

| Pre-treatment Requirements | | | | |
|----------------------------|----------------|-------------------------------|--|--|
| Drug | Dose | CCMB Administration Guideline | | |
| | Not Applicable | | | |

| Treatment Regimen – SARC – DOXOrubicin | | | | |
|--|-------------------------|------------------------------------|--|--|
| Establish primary solution 500 mL of: normal saline | | | | |
| Drug | Dose | CCMB Administration Guideline | | |
| aprepitant | 125 mg | Orally 1 hour pre-chemotherapy | | |
| OLANZapine | 2.5 mg | Orally 30 minutes pre-chemotherapy | | |
| ondansetron | 16 mg | Orally 30 minutes pre-chemotherapy | | |
| dexamethasone | 12 mg | Orally 30 minutes pre-chemotherapy | | |
| DOXOrubicin | 75 mg/m ² ** | IV push over 10 minutes | | |
| **Patients greater than 65 years old may receive 60 mg/m² as starting dose | | | | |

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 as clinically indicated

All Cycles

• CBC, serum creatinine, urea, liver enzymes and electrolytes as per Physician Orders



ADULT SARC – DOXOrubicin

| 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 and 3 | |
| 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 a 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
- Reinforce applicable safe handling precautions of medications, blood and body fluids for 48 hours after completion of chemotherapy

ADDITIONAL INFORMATION

- DOXOrubicin is cardiotoxic
- Cumulative DOXOrubicin dose should be calculated and should not exceed 450 mg/m². If exceeding 450 mg/m², consideration to adding dexrazoxane should be given if patient is benefiting from DOXOrubicin therapy