

## Regimen Reference Order

### ESOPH – nivolumab (Adjuvant) every 28 days

ARIA: ESOPH - [nivolumab (ADJ) q28d]

**Planned Course:** Every 28 days up to a maximum of 1 year of therapy (13 cycles)  
**Indication for Use:** Esophageal or Gastroesophageal Junction Cancer, Resected; Adjuvant  
**Drug Alert:** Immune Checkpoint Inhibitor  
**CVAD:** At Provider’s Discretion

**Proceed with treatment if:**

- *ANC equal to or greater than 1.5 x 10<sup>9</sup>/L AND Platelets equal to or greater than 50 x 10<sup>9</sup>/L*
- *AST/ALT equal to or less than 3 times the upper limit of normal*
- *Total bilirubin equal to or less than 1.5 times the upper limit of normal*
- *Creatinine clearance is equal to or greater than 30 mL/minute*

❖ **Contact Physician if parameters not met**

### SEQUENCE OF MEDICATION ADMINISTRATION

Pre-treatment Requirements		
Drug	Dose	CCMB Administration Guideline
Not Applicable		

Treatment Regimen – ESOPH – nivolumab (Adjuvant) every 28 days		
Establish primary solution 500 mL of: normal saline		
Drug	Dose	CCMB Administration Guideline
nivolumab	6 mg/kg	IV in normal saline 100 mL over 30 minutes <i>Use 0.2 or 0.22 micron filter</i>
<p><b>Maximum nivolumab dose is 480 mg</b></p> <p>All doses will be automatically rounded that fall within CCMB Approved Dose Bands. See Dose Banding document for more information</p>		

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

## REQUIRED MONITORING

### All Cycles

- CBC, serum creatinine, urea, electrolytes, liver enzymes, total bilirubin, albumin and glucose as per Physician Orders
- TSH monthly
- Medical oncologist or designate (i.e. family practitioner in oncology) must assess patient for immune-mediated adverse reactions prior to each dose
- Full vital signs (temperature, heart rate, respiratory rate, blood pressure and O<sub>2</sub> saturation) at baseline and as clinically indicated
- No observation period is required. Patient can be discharged from treatment room if stable whether they had a reaction or not

### Recommended Support Medications

Drug	Dose	CCMB Administration Guideline
None required		

## DISCHARGE INSTRUCTIONS

- Patients should be instructed to contact their cancer team immediately if symptoms of hypersensitivity reactions occur after discharge
- Confirm that patient has received the CCMB Immune Checkpoint Inhibitor Medical Alert wallet card
- Reinforce to patient the immune-mediated adverse reactions and importance of reporting immediately
  - For severe symptoms, the patient should be instructed to go to the nearest emergency room. Oncologist on call should be contacted

## ADDITIONAL INFORMATION

- nivolumab is an Immune Checkpoint Inhibitor. Consult with oncologist for immune-mediated adverse reactions; corticosteroids are often indicated