# **Regimen Reference Order**

# THOR – PACLitaxel + CARBOplatin with concurrent radiation

ARIA: LUNG - [PACLitaxel + CARBO with RT]

Planned Course:Once weekly for 6 weeks with concurrent radiationIndication for Use:Non-Small Cell Lung Cancer

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  $\therefore$  Contact Physician if parameters are not met

### SEQUENCE OF MEDICATION ADMINISTRATION

	Pre-treat	ment Requirements
Drug	Dose	CCMB Administration Guideline
	Ν	lot Applicable

Treatment Regimen – THOR – PACLitaxel + CARBOplatin + radiation				
Establish primary solution 500 mL of: normal saline				
Drug	Dose	CCMB Administration Guideline		
Days 1, 8, 15, 22, 29	and 36			
cetirizine	20 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><b>1 hour</b></u> prior to PACLitaxel		
		*Nursing Alert: PACLitaxel starts <b>1 hour after completion</b> of dexamethasone infusion		
Wait 1 hour after com	pletion of IV pre-medicatio	on(s) before starting PACLitaxel		
PACLitaxel	45 mg/m <sup>2</sup>	IV in normal saline 250 mL over 1 hour, following the administration rates below:		
		Administer at 100 mL/hour for 15 minutes, then		
		Administer remaining volume over 45 minutes		
		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 of PACLitaxel to evenly distribute the drug		
CARBOplatin	AUC 3 mg/mL.min; maximum dose 450 mg	IV in D5W 250 mL over 30 minutes		
	(see table below)			

All doses will be automatically rounded that fall within CCMB Approved Dose Bands. See Dose Banding document for more information

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

#### **REQUIRED MONITORING**

Days 1, 8, 15, 22, 29 and 36

- CBC, serum creatinine, electrolytes and liver enzymes as per Physician Orders
- 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 after PACLitaxel administration. Patient can be discharged from treatment room if stable whether they had a reaction or not

Drug	Dose	CCMB Administration Guideline
dexamethasone	8 mg	Orally once daily on Days 2, 3, 9, 10, 16, 17, 23, 24, 30, 31, 37 and 38 (i.e. for 2 days beginning the day after each dose of chemotherapy)
metoclopramide	10 – 20 mg	Orally every 4 hours as needed for nausea and vomiting

# **Recommended Support Medications**

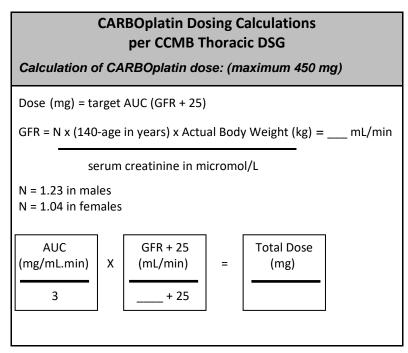
# **DISCHARGE INSTRUCTIONS**

- 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**

- PACLitaxel may cause progressive, irreversible neuropathy
- CARBOplatin dose considerations:
  - o CCMB Thoracic DSG uses actual body weight to calculate GFR
  - o CCMB Thoracic DSG uses a maximum CARBOplatin dose of 450 mg for this regimen
  - If calculated CARBOplatin dose differs more than 10% from prescribed CARBOplatin dose, contact the prescriber
- Since treatment is given concurrently with radiation, site restrictions are in place





#### 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 above may not be appropriate for some patient populations (for example, acute renal failure).

