Regimen Reference Order – GYNE – bevacizumab + PACLitaxel

ARIA: GYNE - [bev + weekly PACLitaxel]

Planned Course: Every 28 days until disease progression or unacceptable toxicity
Indication for Use: Ovarian Cancer Platinum-Resistant

CVAD: Preferred

Proceed with treatment if:
Cycle 1
Day 1
- ***ANC equal to or greater than 1.5 x 10^9/L AND Platelets equal to or greater than 100 x 10^9/L***

Days 8, 15 and 22
- ***ANC equal to or greater than 1.2 x 10^9/L AND Platelets equal to or greater than 75 x 10^9/L***

Cycle 2 and Onwards
Days 1, 8, 15 and 22
- ***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
Not Applicable		

Treatment Regimen – GYNE – bevacizumab + PACLitaxel

Establish primary solution 500 mL of: normal saline

Drug	Dose	CCMB Administration Guideline
Days 1 and 15		
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*
cetirizine	20 mg	Orally 1 hour prior to PACLitaxel
dexamethasone	20 mg	IV in normal saline 50 mL over 15 minutes **1 hour** prior to PACLitaxel **Nursing Alert: PACLitaxel starts **1 hour after completion** of dexamethasone infusion*
Wait 1 hour after completion of IV pre-medication(s) before starting PACLitaxel		

PACLitaxel	80 mg/m^2	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*
Days 8 and 22		
cetirizine	20 mg	Orally 1 hour prior to PACLitaxel
dexamethasone	20 mg	IV in normal saline 50 mL over 15 minutes **1 hour** prior to PACLitaxel **Nursing Alert:* PACLitaxel starts ***1 hour after completion*** of dexamethasone infusion*
Wait 1 hour after completion of IV pre-medication(s) before starting PACLitaxel		
PACLitaxel	80 mg/m^2	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*
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 and 15

- 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 O_2 saturation) at baseline and as clinically indicated
- No observation period is required after bevacizumab or PACLitaxel infusions. Patient can be discharged from treatment room if stable whether they had a reaction or not

Days 8 and 22

- CBC, serum creatinine and liver enzymes as per Physician Orders
- Full vital signs (temperature, heart rate, respiratory rate, blood pressure and O_2 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

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
- PACLitaxel may cause progressive, irreversible neuropathy
- 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**