

Regimen Reference Order

BRST – PERTuzumab + trastuzumab + DOCETaxel

ARIA: BRST - [PERTuz+tras+DOCETaxel]

BRST - [PERTuz + tras - Phase 2]

Planned Course: Phase 1: PERTuzumab + trastuzumab + DOCETaxel every 21 days for 6 to 8 cycles, followed by:
Phase 2: PERTuzumab + trastuzumab every 21 days until disease progression or unacceptable toxicity

Indication for use: Breast Cancer Metastatic HER2 positive

CVAD: At Provider’s Discretion

Proceed with treatment if:

PERTuzumab + trastuzumab + DOCETaxel (Phase 1)

- *ANC equal to or greater than 1.5 x 10⁹/L AND Platelets equal to or greater than 100 x 10⁹/L*

PERTuzumab + trastuzumab (Phase 2)

- *Blood work at provider’s discretion: not required to proceed with treatment*
- ❖ *Contact Physician if parameters not met*

SEQUENCE OF MEDICATION ADMINISTRATION

Pre-treatment Requirements

Drug	Dose	CCMB Administration Guideline
dexamethasone	8 mg	Orally twice daily the day before DOCETaxel treatment and one dose the morning of DOCETaxel treatment (Self-administered at home) <i>*Nursing Alert: Notify physician if patient has not taken dexamethasone. dexamethasone is prescribed to prevent infusion reactions</i>

Treatment Regimen: BRST – PERTuzumab + trastuzumab + DOCETaxel

Establish primary solution 500 mL of: normal saline

Drug	Dose	CCMB Administration Guideline
Phase 1 – PERTuzumab + trastuzumab + DOCETaxel (1 cycle = 21 days)		
Cycle 1		
Day 1		
PERTuzumab	840 mg Loading Dose	IV in normal saline 250 mL over 1 hour
Day 2		
trastuzumab (brand name specific)	8 mg/kg Loading Dose	IV in normal saline 250 mL over 90 minutes <i>*Alert: Ensure brand name on prescription label (indicated in</i>

		<i>brackets on prescription label) matches prescribed order</i> *Nursing Alert: DOCEtaxel infusion begins after observation period is complete
DOCEtaxel	75 mg/m ²	IV in normal saline 250 mL over 1 hour, following the administration rates below: <ul style="list-style-type: none"> • Administer at 100 mL/hour for 15 minutes, then • Administer remaining volume over 45 minutes <i>Use non-DEHP bags and non-DEHP administration sets</i> OR For 500 mL bags (when Pharmacy must prepare DOCEtaxel in 500 mL normal saline for concentration-dependent stability): IV in normal saline 500 mL over 1 hour, following the administration rates below: <ul style="list-style-type: none"> • Administer at 200 mL/hour for 15 minutes, then • Administer remaining volume over 45 minutes <i>Use non-DEHP bags and non-DEHP administration sets</i> <i>Use non-DEHP bags and non-DEHP administration sets</i>
normal saline	100 mL	ONLY for patients with a PORT IV over 12 minutes *Nursing Alert: This volume is to be administered after standard flush
Cycles 2 to 8		
PERTuzumab	420 mg	IV in normal saline 250 mL over 30 minutes
trastuzumab (brand name specific)	6 mg/kg	IV in normal saline 250 mL over 30 minutes *Alert: Ensure brand name on prescription label (indicated in brackets on prescription label) matches prescribed order
DOCEtaxel	75 mg/m ²	IV in normal saline 250 mL over 1 hour, following the administration rates below: <ul style="list-style-type: none"> • Administer at 100 mL/hour for 15 minutes, then • Administer remaining volume over 45 minutes <i>Use non-DEHP bags and non-DEHP administration sets</i> OR For 500 mL bags (when Pharmacy must prepare DOCEtaxel in 500 mL normal saline for concentration-dependent stability): IV in normal saline 500 mL over 1 hour, following the administration rates below: <ul style="list-style-type: none"> • Administer at 200 mL/hour for 15 minutes, then • Administer remaining volume over 45 minutes <i>Use non-DEHP bags and non-DEHP administration sets</i> <i>Use non-DEHP bags and non-DEHP administration sets</i>
normal saline	100 mL	ONLY for patients with a PORT IV over 12 minutes *Nursing Alert: This volume is to be administered after standard flush

Phase 2 – PERTuzumab + trastuzumab (1 cycle = 84 days)		
PERTuzumab	420 mg	IV in normal saline 250 mL over 30 minutes on Days 1, 22, 43 and 64
trastuzumab (brand name specific)	6 mg/kg	IV in normal saline 250 mL over 30 minutes on Days 1, 22, 43 and 64 <i>*Alert: Ensure brand name on prescription label (indicated in brackets on prescription label) matches prescribed order</i>
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

PERTuzumab + trastuzumab + DOCEtaxel (Phase 1)

All Cycles

- CBC, biochemistry and liver enzymes as per Physician Orders

Cycle 1, Day 1

- Full vital signs (temperature, heart rate, respiratory rate, blood pressure and O₂ saturation) at baseline and as clinically indicated
- Observe patient for 1 hour after PERTuzumab administration. Full vital signs prior to discharge

Cycle 1, Day 2

- Full vital signs (temperature, heart rate, respiratory rate, blood pressure and O₂ saturation) at baseline and as clinically indicated
- Observe patient for 30 minutes after trastuzumab administration. DOCEtaxel infusion begins after observation period is complete
- No observation period is required after DOCEtaxel administration. Patient can be discharged from treatment room if stable whether they had a reaction or not

Cycle 2 and Onwards

- Full vital signs (temperature, heart rate, respiratory rate, blood pressure and O₂ saturation) at baseline and as clinically indicated
- No observation period is required after PERTuzumab, trastuzumab or DOCEtaxel administration. Patient can be discharged from treatment room if stable whether they had a reaction or not

PERTuzumab + trastuzumab (Phase 2)

Cardiac monitoring

- Left Ventricular Ejection Fraction (LVEF) monitoring recommended:
 - At baseline, and
 - every 3 months for the first 2 years, then
 - every 3 to 6 months thereafter

All Cycles

- Full vital signs (temperature, heart rate, respiratory rate, blood pressure and O₂ saturation) at baseline and as clinically indicated
- No observation period is required after PERTuzumab or trastuzumab 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
PERTuzumab + trastuzumab + DOCEtaxel (Phase 1)		
metoclopramide	10 – 20 mg	Orally every 4 hours as needed for nausea and vomiting

DISCHARGE INSTRUCTIONS

All Cycles

- Patients should be instructed to contact their cancer team immediately if symptoms of hypersensitivity reactions occur after discharge

PERTuzumab + trastuzumab + DOCEtaxel (Phase 1)

- 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

- trastuzumab is available from more than one manufacturer and uses several different brand names. Brand name will be indicated in brackets after trastuzumab. **Ensure prescription label matches the brand name on prescribed order**
- After completion of DOCEtaxel, patients can continue on PERTuzumab plus trastuzumab alone; prescribers will use the **BRST - [PERTuz + tras - Phase 2]** regimen when DOCEtaxel is complete