

Regimen Reference Order – BRST – FEC-D

ARIA: BRST – [FEC-D]

Planned Course: Every 21 days for 6 cycles (cycles 1 to 3 FEC-100, cycles 4 to 6 DOCetaxel)

Indication for Use: Breast Cancer Adjuvant

CVAD: Preferred (VESICANT INVOLVED)

Proceed with treatment if:

ANC equal to or greater than $1 \times 10^9/L$ 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
Cycles 1 to 3 (FEC)		
Not Applicable		
Cycles 4 to 6 (DOCetaxel)		
dexamethasone	8 mg	Orally twice daily the day before treatment and one dose the morning of DOCetaxel treatment (self-administered at home)

Treatment Regimen – BRST – FEC-D

Establish primary solution 500 mL of: normal saline		
Drug	Dose	CCMB Administration Guideline
Cycles 1 to 3 (FEC)		
aprepitant	125 mg	Orally 30 minutes pre-chemotherapy
dexamethasone	12 mg	Orally 30 minutes pre-chemotherapy
granisetron	1 mg	Orally 30 minutes pre-chemotherapy **NO SUBSTITUTION**
epiRUBicin	100 mg/m^2	IV Push over 10-15 minutes
fluorouracil	500 mg/m^2	IV Push over 3-5 minutes
cyclophosphamide	500 mg/m^2	IV in normal saline 250 mL over 1 hour

Cycles 4 to 6 (DOCEtaxel)		
Drug	Dose	CCMB Administration Guideline
metoclopramide	20 mg	Orally 30 minutes pre-chemotherapy
DOCEtaxel	100 mg/m ²	IV in normal saline 250 mL over 1 hour For 250 mL bags: Infuse 25 mL over 15 minutes and remainder of bag over 45 minutes For 500 mL bags: Infuse 50 mL over 15 minutes and remainder of bag over 45 minutes Use non-DEHP bags and non-DEHP administration sets <i>*Nursing Alert: Pump programming should reflect actual volume in the bag</i>

Flush after each medication:

- 100 mL over 12 minutes (500 mL/hr)

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

REQUIRED MONITORING

All Cycles

- CBC, biochemistry as per physician order
- Assess patient to rule out dehydration
- Before treatment ensure patient is voiding
- Left Ventricular Ejection Fraction (LVEF) monitoring is recommended at baseline and as clinically indicated

Cycle 4 (First DOCEtaxel Cycle)

- Full vital signs (temperature, heart rate, respiration, blood pressure and O₂ saturation) at baseline and as clinically indicated
- Monitor heart rate and blood pressure every 15 minutes
- Observe patient for 1 hour after administration
- Full vital signs prior to discharge

Cycles 5 and 6 (DOCEtaxel)

- Full vital signs at baseline and as clinically indicated
- Monitor as needed

Recommended Support Medications

Drug	Dose	CCMB Administration Guideline
Cycles 1 to 3 (FEC)		
aprepitant	80 mg	Orally once daily on Days 2 and 3 of chemotherapy cycle
granisetron	1 mg	Orally twice daily beginning the evening of chemotherapy and continuing for a total of 4 doses
dexamethasone	4 mg	Orally twice daily on Days 2 and 3
metoclopramide	10 - 20 mg	Orally every 4 – 6 hours as needed for nausea and vomiting

Cycles 4 to 6 (DOCEtaxel)		
Drug	Dose	CCMB Administration Guideline
metoclopramide	10 - 20 mg	Orally every 4 – 6 hours as needed for nausea and vomiting

DISCHARGE INSTRUCTIONS

All Cycles

- 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

Cycles 1 to 3 (FEC)

- Instruct patient to:
 - Maintain oral intake of 2000 mL (8 glasses) of fluid daily at home
 - Empty bladder every 2 hours while awake and at bedtime for 24 hours
 - Obtain immediate assistance as per your clinic's contact instructions if:
 - Signs of hemorrhagic cystitis
 - Unable to drink recommended amount of fluid

ADDITIONAL INFORMATION

- N/A