

## Regimen Reference Order – BRST – TC

ARIA: BRST – [TC]

Planned Course: Every 21 days for 4 cycles

Indication for Use: Breast Cancer Adjuvant

CVAD: At Provider's Discretion

**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
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 - TC

Establish primary solution 500 mL of: normal saline		
Drug	Dose	CCMB Administration Guideline
ondansetron	16 mg	Orally 30 minutes pre-chemotherapy
DOCEtaxel	$75 \text{ mg/m}^2$	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 <i>Use non-DEHP bags and non-DEHP administration sets</i> <i>*Nursing Alert: Pump programming should reflect actual volume in the bag</i>
cyclophosphamide	$600 \text{ mg/m}^2$	IV in normal saline 250 mL over 1 hour

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

### Cycle 1 Only

- CBC, biochemistry as per physician order
- Assess patient to rule out dehydration
- Before treatment ensure patient is voiding
- Full vital signs (temperature, heart rate, respiration, blood pressure and O<sub>2</sub> saturation) at baseline and as clinically indicated
- Monitor heart rate and blood pressure every 15 minutes
- Observe patient post DOCEtaxel for 30 minutes, prior to starting cyclophosphamide
- Full vital signs prior to discharge

### Cycle 2 and Onwards

- CBC, biochemistry as per physician order
- Full vital signs at baseline and as clinically indicated
- Monitor as needed

## Recommended Support Medications

Drug	Dose	CCMB Administration Guideline
ondansetron	8 mg	Orally 12 hours after chemotherapy
metoclopramide	10 - 20 mg	Orally every 4 – 6 hours as needed for nausea and vomiting

## DISCHARGE INSTRUCTIONS

- 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 the completion of chemotherapy

## ADDITIONAL INFORMATION

- N/A