Regimen Reference Order – GAST – trastuzumab + FOLFOX-6

ARIA: GAST – [trastuzumab + FOLFOX-6 (MET)]

Planned Course: Every 14 days for 9 cycles
Indication for Use: Gastric Cancer/Gastroesophageal Junction Tumor Metastatic; HER2 positive

CVAD: Required (Ambulatory Pump)

Proceed with treatment if:

ANC equal to or greater than 1.5 x 10^9/L AND Platelets equal to or greater than 100 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 – GAST – trastuzumab + FOLFOX-6

Drug	Dose	CCMB Administration Guideline
Establish primary solution 500 mL of: normal saline (trastuzumab incompatible with D5W)		
trastuzumab (brand name specific)	**Cycle 1:** 6 mg/kg Loading Dose	IV in normal saline 250 mL over 90 minutes **Alert*: *Ensure brand name on prescription label (indicated in brackets on prescription label) matches prescribed order* **Nursing Alert*: oxaliplatin infusion starts after observation period is complete
	Cycles 2 to 9: 4 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*
Establish primary solution 500 mL of: D5W (oxaliplatin incompatible with normal saline)		
ondansetron	16 mg	Orally 30 minutes pre-chemotherapy
dexamethasone	12 mg	Orally 30 minutes pre-chemotherapy
oxaliplatin	85 mg/m^2	IV in D5W 500 mL over 2 hours
fluorouracil	2400 mg/m^2	IV in D5W continuously over 46 hours by ambulatory infusion device
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

Cardiac monitoring

- Left Ventricular Ejection Fraction (LVEF) monitoring is recommended at baseline and every 4 cycles

All Cycles

- CBC, serum creatinine, urea, electrolytes, liver enzymes and total bilirubin as per Physician Orders

Cycle 1 Only

- Full vital signs (temperature, heart rate, respiratory rate, blood pressure and O_2 saturation) at baseline and as clinically indicated
- Observe patient for 30 minutes after trastuzumab infusion. Full vital signs after observation period is complete. oxaliplatin infusion begins after observation period is complete

Cycles 2 to 9

- Full vital signs at baseline and as clinically indicated
- No observation period required after 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
dexamethasone	8 mg	Orally once daily on Days 2 and 3
prochlorperazine	10 mg	Orally every 6 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
- Ensure patient has received a home chemotherapy spill kit and instructions for use
- Reinforce applicable safe handling precautions of medications, blood and body fluids for 48 hours after completion of chemotherapy

ADDITIONAL INFORMATION

- oxaliplatin causes cold intolerance and laryngopharyngeal dysesthesia
  - no ice chips or cold drinks
- oxaliplatin may cause progressive, irreversible neuropathy
  - dose modification may be required
- 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**