

Regimen Reference Order – GAST – OFF

ARIA: GAST – [OFF]

Planned Course: Days 1, 8, 15 and 22 every 42 days until disease progression or unacceptable toxicity

Indication for Use: Pancreatic Cancer Metastatic

CVAD: Required (Ambulatory Pump)

Proceed with treatment if:

ANC equal to or greater than $1.5 \times 10^9/L$ 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 |
|----------------|------|-------------------------------|
| Not Applicable | | |

Treatment Regimen – GAST - OFF

Establish primary solution 500 mL of: D5W

| Drug | Dose | CCMB Administration Guideline |
|----------------------|-----------------------|--|
| Days 1 and 15 | | |
| metoclopramide | 20 mg | Orally 30 minutes pre-chemotherapy |
| leucovorin | 200 mg/m^2 | IV in 250 mL D5W over 30 minutes |
| fluorouracil | 2000 mg/m^2 | IV in D5W continuously over 24 hours by ambulatory infusion device |
| Days 8 and 22 | | |
| ondansetron | 8 mg | IV in normal saline 50 mL over 15 minutes |
| dexamethasone | 12 mg | Orally 30 minutes pre-chemotherapy |
| oxaliplatin | 85 mg/m^2 | IV in 500 mL D5W over 2 hours |
| leucovorin | 200 mg/m^2 | IV in 250 mL D5W over 30 minutes Administer leucovorin during the last 30 minutes of oxaliplatin infusion on Days 8 and 22 |
| fluorouracil | 2000 mg/m^2 | IV in D5W continuously over 24 hours by ambulatory infusion device |

All doses will be automatically rounded that fall within the DSG Approved Dose Bands. See GAST DSG – Dose Banding document for more information

Flush after each medication:

- 50 mL over 6 minutes (500 mL/hr)

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

REQUIRED MONITORING

All Cycles

Day 1

- CBC, biochemistry as per physician order

Days 8, 15 and 22

- CBC

Recommended Support Medications

| Drug | Dose | CCMB Administration Guideline |
|------------------|-------|--|
| dexamethasone | 4 mg | Orally twice daily on Days 9 and 10 and on Days 23 and 24 |
| prochlorperazine | 10 mg | Orally every 4 hours as needed for nausea and vomiting |

DISCHARGE INSTRUCTIONS

- 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