

## Regimen Reference Order – GAST – bevacizumab + de Gramont

ARIA: GAST – [bevacizumab + de Gramont]

Planned Course: Every 14 days until disease progression or unacceptable toxicity

Indication for Use: Colorectal 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 – bevacizumab + de Gramont

Establish primary solution 500 mL of: normal saline (bevacizumab incompatible with D5W)

Drug	Dose	CCMB Administration Guideline
metoclopramide	10 mg	Orally 30 minutes pre-chemotherapy
bevacizumab	5 mg/kg	IV in normal saline 100 mL on Day 1 <ul style="list-style-type: none"> <li>• Dose 1 to be infused over 90 minutes</li> <li>• Dose 2 to be infused over 60 minutes (if first dose well tolerated)</li> <li>• Dose 3 and subsequent to be infused over 30 minutes (if second dose well tolerated)</li> </ul>
leucovorin	$400 \text{ mg/m}^2$	IV in 250 mL D5W over 2 hours on Day 1
5-fluorouracil bolus	$400 \text{ mg/m}^2$	IV Push over 5 minutes on Day 1
5-fluorouracil infusion	$2400 \text{ mg/m}^2$	IV by ambulatory infusion device over 46 hours on Days 1 - 3

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

- CBC, biochemistry, liver function tests, urine protein, blood pressure at baseline and prior to each cycle as per physician order
  - Urinalysis for protein: Where urinalysis is not possible, use dipstick. If lab urinalysis for protein is greater than or equal to 1 g/L or dipstick proteinuria shows 2+ or 3+, notify prescriber
- Full vital signs (temperature, heart rate, respiration, blood pressure and O<sub>2</sub> saturation) at baseline and as clinically indicated

### Recommended Support Medications

Drug	Dose	CCMB Administration Guideline
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 completion of chemotherapy

## ADDITIONAL INFORMATION

- bevacizumab causes increased risk of hypertension, post-operative bleeding, wound healing complications and thromboembolic events