

## Regimen Reference Order – GYNE – DOCetaxel

ARIA: GYNE - [DOCetaxel]

Planned Course: Every 21 days until disease progression or unacceptable toxicity

Indication for Use: Ovarian or Endometrial Cancer Recurrent

CVAD: At Provider's Discretion

### Proceed with treatment if:

#### Cycle 1

- ANC equal to or greater than  $1.5 \times 10^9/L$  AND Platelets equal to or greater than  $100 \times 10^9/L$

#### Cycle 2 and Onwards

- ANC equal to or greater than  $1.2 \times 10^9/L$  AND Platelets equal to or greater than  $75 \times 10^9/L$
- ❖ 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 DOCetaxel treatment and one dose the morning of DOCetaxel treatment (Self-administered at home) <i>*Nursing Alert: Notify physician if patient has not taken dexamethasone. dexamethasone is prescribed to prevent infusion reactions</i>

#### Treatment Regimen – GYNE – DOCetaxel

Establish primary solution 500 mL of: normal saline		
Drug	Dose	CCMB Administration Guideline
DOCetaxel	$75 \text{ mg/m}^2$	IV in normal saline 250 mL over 1 hour, following the administration rates below: <ul style="list-style-type: none"> <li>• Administer at 100 mL/hour for 15 minutes, then</li> <li>• Administer remaining volume over 45 minutes</li> </ul> Use non-DEHP bags and non-DEHP administration sets <b>OR</b> <b>For 500 mL bags</b> (when Pharmacy must prepare DOCetaxel in 500 mL normal saline for concentration-dependent stability): IV in normal saline 500 mL over 1 hour, following the administration rates below: <ul style="list-style-type: none"> <li>• Administer at 200 mL/hour for 15 minutes, then</li> <li>• Administer remaining volume over 45 minutes</li> </ul> Use non-DEHP bags and non-DEHP administration sets
normal saline	100 mL	<b>ONLY</b> for patients with a PORT IV over 12 minutes <i>*Nursing Alert: This volume is to be administered after standard flush</i>

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

## REQUIRED MONITORING

### All Cycles

- CBC, serum creatinine and liver enzymes as per Physician Orders
- Full vital signs (temperature, heart rate, respiratory rate, blood pressure and O<sub>2</sub> saturation) at baseline and as clinically indicated
- No observation period is required. Patient can be discharged from treatment room if stable whether they had a reaction or not

### Recommended Support Medications

Drug	Dose	CCMB Administration Guideline
metoclopramide	10 – 20 mg	Orally every 4 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
- Reinforce applicable safe handling precautions of medications, blood and body fluids for 48 hours after completion of chemotherapy

## ADDITIONAL INFORMATION

- Not applicable