Regimen Reference Order – LYMP - gemcitabine

ARIA: LYMP - [gemcitabine]

Planned Course: Every 28 Days for 3 to 6 cycles

Indication for Use: Mycosis Fungoides

CVAD: At Provider's Discretion

Proceed with treatment if:

Day 1

• ANC equal to or greater than $1 \times 10^9/L$ AND Platelets equal to or greater than $50 \times 10^9/L$ Days 8 and 15

- Blood work not required to proceed with treatment
 - Contact Physician if parameters not met

Note: Hepatitis B serology results must be reviewed in accordance with CCMB Policy Hepatitis B Monitoring for Oncology and Hematology Patients

SEQUENCE OF MEDICATION ADMINISTRATION

Pre-treatment Requirements				
Drug	Dose	CCMB Administration Guideline		
Not Applicable				

Treatment Regimen – LYMP - gemcitabine				
Establish primary solution 500 mL of: normal saline				
Drug	Dose	CCMB Administration Guideline		
Days 1, 8 and 15				
dexamethasone	8 mg	Orally 30 minutes pre-chemotherapy		
gemcitabine	1200 mg/m ²	IV in normal saline 250 mL over 30 minutes		

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

REQUIRED MONITORING

Hepatitis B serology

Hepatitis B surface antigen and Hepatitis B core antibody (drawn within preceding 5 years)

All Cycles

Day 1

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

Days 8 and 15

No blood work required



ADULT LYMP - gemcitabine

Recommended Support Medications				
	Drug	Dose	CCMB Administration Guideline	
	metoclopramide	10 – 20 mg	Orally every 4 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

• Due to the risk of reactivation of Hepatitis B virus (HBV) while on this treatment regimen, prescriber must adhere to CCMB Policy *Hepatitis B Monitoring for Oncology and Hematology Patients* for ordering and interpreting HBV serology and prescribing antiviral prophylaxis

