

Regimen Reference Order – LYMP – GELOX

ARIA: LYMP – [GELOX]

Planned Course: Every 21 days for 6 cycles

Indication for Use: Extranodal Natural Killer/T-Cell Lymphoma

CVAD: At Provider's Discretion

Proceed with treatment if:

Day 1

- ANC equal to or greater than $1.5 \times 10^9/L$ AND Platelets equal to or greater than $75 \times 10^9/L$
- fibrinogen greater than 1 g/L

Days 2 to 7

- fibrinogen greater than 1 g/L
- ❖ Contact Hematologist if parameters not met

SEQUENCE OF MEDICATION ADMINISTRATION

Pre-treatment Requirements

Drug	Dose	CCMB Administration Guideline
allopurinol*	300 mg	Orally once daily for 10 days to begin 3 days prior to Cycle 1 and at provider's discretion for subsequent cycles *Only patients at risk of tumor lysis syndrome will be prescribed allopurinol

Treatment Regimen – LYMP - GELOX

Establish primary solution 500 mL of: D5W

Drug	Dose	CCMB Administration Guideline
Day 1		
asparaginase (<i>E. coli</i>)	6000 units/m ²	Intramuscular (IM) once daily
ondansetron	16 mg	Orally 30 minutes pre-chemotherapy
dexamethasone	12 mg	Orally 30 minutes pre-chemotherapy
gemcitabine	1000 mg/m ²	IV in normal saline 250 mL over 30 minutes
oxaliplatin	130 mg/m ²	IV in D5W 500 mL over 2 hours Concentration dependent drug: Pharmacy will adjust diluent volume to ensure drug stability
Days 2 to 7		
asparaginase (<i>E. coli</i>) cannot be administered on weekends or holidays		
asparaginase (<i>E. coli</i>)	6000 units/m ²	Intramuscular (IM) once daily

Day 8		
metoclopramide	20 mg	Orally 30 minutes pre-chemotherapy
gemcitabine	1000 mg/m ²	IV in normal saline 250 mL over 30 minutes
All doses will be automatically rounded that fall within the DSG Approved Dose Bands. See LYMP 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

Day 1

- CBC, fibrinogen, biochemistry as per physician order
- Observe patient for 1 hour after each dose of asparaginase (*E. coli*)

Days 2 to 7

- Fibrinogen
- Observe patient for 1 hour after each dose of asparaginase (*E. coli*)

Day 8

- No blood work required

Recommended Support Medications

Drug	Dose	CCMB Administration Guideline
Grastofil®	5 mcg/kg (rounded to nearest 300 mcg or 480 mcg)	Inject subcutaneously once daily on Days 11 to 17 inclusively
dexamethasone	4 mg	Orally twice daily on Days 2 and 3
acetylsalicylic acid (ASA) enteric coated	81 mg delayed release	Orally once daily at the physician's discretion
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

- Physicians must be on site in case of reactions to asparaginase (*E. coli*)
 - Do not administer on weekends or holidays
 - Patient must receive a total of 7 doses per cycle, unless otherwise directed
- asparaginase (*E. coli*) can cause anaphylaxis. diphenhydrAMINE, hydrocortisone and EPINEPHrine must be available in case of reaction