

Regimen Reference Order – SARC – DOXOrubicin

ARIA: - SARC – [DOXOrubicin]

Planned Course: Every 21 days for 6 to 8 cycles

Indication for Use: Sarcoma

CVAD: Preferred (VESICANT INVOLVED)

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

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 – SARC – DOXOrubicin

Establish primary solution 500 mL of: normal saline

Drug	Dose	CCMB Administration Guideline
aprepitant	125 mg	Orally 1 hour pre-chemotherapy
OLANzapine	2.5 mg	Orally 30 minutes pre-chemotherapy
ondansetron	16 mg	Orally 30 minutes pre-chemotherapy
dexamethasone	12 mg	Orally 30 minutes pre-chemotherapy
DOXOrubicin	75 mg/m ² **	IV push over 10 minutes

**Patients greater than 65 years old may receive 60 mg/m² as starting dose

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)

Cardiac monitoring

- Left Ventricular Ejection Fraction (LVEF) at baseline and as clinically indicated

All Cycles

- CBC, serum creatinine, urea, electrolytes and liver enzymes and as per Physician Orders

Recommended Support Medications

Drug	Dose	CCMB Administration Guideline
aprepitant	80 mg	Orally once daily on Days 2 and 3
dexamethasone	8 mg	Orally once daily on Days 2 and 3
OLANzapine	2.5 mg	Orally the evening of Day 1 then twice daily on Days 2, 3 and 4. Also use OLANzapine 2.5 to 5 mg AS NEEDED for breakthrough nausea and vomiting (including Days 1 to 4) up to a maximum of 10 mg per day. Contact clinic if nausea/vomiting is not adequately controlled

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

- DOXOrubicin is cardiotoxic
- Cumulative DOXOrubicin dose should be calculated and should not exceed 450 mg/m². If exceeding 450 mg/m², consideration to adding dexrazoxane should be given if patient is benefiting from DOXOrubicin therapy
- 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