Regimen Reference Order – SARC – temozolomide + bevacizumab

ARIA: SARC – [temozolomide + bevacizumab]

Planned Course: **Every 28 days until disease progression or unacceptable toxicity**
Indication for Use: **Hemangiopericytoma and Malignant Solitary Fibrous Tumor**

CVAD: Preferred

Proceed with treatment if:

Days 1 and 15

- ***ANC equal to or greater than 1 x 10^9/L AND Platelets equal to or greater than 75 x 10^9/L***

Days 8 and 22

- ***Urine protein less than 1 g/L (Day 1 results)***
  - **Contact Physician if parameters not met**

Do not give bevacizumab on Day 8 if temozolomide not taken on Days 1 to 7
Do not give bevacizumab on Day 22 if temozolomide not taken on Days 15 to 21

SEQUENCE OF MEDICATION ADMINISTRATION

Pre-treatment Requirements

Drug	Dose	CCMB Administration Guideline
Not Applicable		

Treatment Regimen – SARC – temozolomide + bevacizumab

Establish primary solution 500 mL of: normal saline (Days 8 and 22)

Drug	Dose	CCMB Administration Guideline
ondansetron	16 mg	Orally 30 minutes prior to temozolomide on **Days 1 to 7 and Days 15 and 21** **(Self-administered at home)**
temozolomide	150 mg/m^2	Orally once daily at bedtime on an empty stomach on **Days 1 to 7 and Days 15 to 21** **(Self-administered at home)**
bevacizumab (brand name specific)	5 mg/kg	IV in normal saline 100 mL over 10 minutes on **Days 8 and 22** **Alert*: *Ensure brand name on prescription label (indicated in brackets on prescription label) matches prescribed order*

temozolomide (Temodal®) available dosage strengths: 5 mg, 20 mg, 100 mg, 140 mg, 250 mg capsules
Classification: Cytotoxic, Hazardous

All doses will be automatically rounded that fall within the DSG Approved Dose Bands. See SARC DSG – Dose Banding document for more information

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

REQUIRED MONITORING

Day 1

- CBC, biochemistry, liver functions, urine protein and blood pressure at baseline as per Physician Orders
    - 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

Days 8 and 22

- Full vital signs (temperature, heart rate, respiratory rate, blood pressure and O_2 saturation) at baseline and as clinically indicated
- No observation period is required after administration. Patient can be discharged from treatment room if stable whether they had a reaction or not

Day 15

- CBC as per Physician Orders

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
- Instruct patient to take ondansetron 30 minutes before bedtime and temozolomide at bedtime on an empty stomach to minimize nausea
- Reinforce applicable safe handling precautions of medications, blood and body fluids for 48 hours after completion of chemotherapy

ADDITIONAL INFORMATION

- temozolomide and ondansetron will be dispensed by CCMB Pharmacy (blister-pack). CCMB Pharmacy will supply patient with one week blister card at a time
- bevacizumab causes increased risk of hypertension, post-operative bleeding, wound healing complications and thromboembolic events
- bevacizumab is available from more than one manufacturer and uses several different brand names. Brand name will be indicated in brackets after bevacizumab. **Ensure prescription label matches the brand name on prescribed order**