# Regimen Reference Order

THOR – PEMEtrexed + CARBOplatin (Adjuvant)

ARIA: LUNG – [PEMEtrexed + CARBO (ADJ)]

LUNG – PEMEtrexed support (NSCLC)

Planned Course:Every 21 days for 4 cyclesIndication for Use:Lung Cancer Non-Small Cell Non-Squamous Adjuvant

CVAD: At Provider's Discretion

### 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

# SEQUENCE OF MEDICATION ADMINISTRATION

Pre-treatment Requirements				
Drug	Dose	CCMB Administration Guideline		
folic acid	1 mg	Orally daily beginning 7 – 14 days prior to first dose of PEMEtrexed and continuing daily until 21 days after the last dose of PEMEtrexed (Self-administered at home)		
vitamin B12	1000 mcg	Intramuscular 7 – 14 days prior to first dose of PEMEtrexed (Note: a second dose of vitamin B12 to be administered on Cycle 4, Day 1)		
dexamethasone	8 mg	Orally once daily the day before, day of and the day after each dose of PEMEtrexed (Higher or additional doses are permitted) (Self-administered at home)		

Treatment Regimen – THOR – PEMEtrexed + CARBOplatin (Adjuvant) Establish primary solution 500 mL of: normal saline				
Day 1				
aprepitant	125 mg	Orally 1 hour pre-chemotherapy		
ondansetron	16 mg	Orally 30 minutes pre-chemotherapy		
dexamethasone	4 mg	Orally 30 minutes pre-chemotherapy *Nursing Alert: this dose is in addition to the 8 mg self- administered dose taken at home morning of Day 1		
PEMEtrexed	500 mg/m <sup>2</sup>	IV in normal saline 100 mL over 10 minutes *Nursing Alert: CARBOplatin starts at least <b>30 minutes after</b> completion of PEMEtrexed infusion		



CARBOplatin	AUC 5 mg/mL.min; maximum dose 750 mg (see table below)	IV in D5W 250 mL over 30 minutes
vitamin B12	1000 mcg	Cycle 4 only: Intramuscular once *Alert: This is the last dose of vitamin B12 that will be given as part of this regimen

Banding document for more information

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

#### **REQUIRED MONITORING**

All Cycles

• CBC, serum creatinine, urea, electrolytes, liver enzymes and total bilirubin 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 Day 3 Note additional Pre-treatment Requirements for PEMEtrexed		
metoclopramide	10 – 20 mg	Orally every 4 hours as needed for nausea and vomiting		

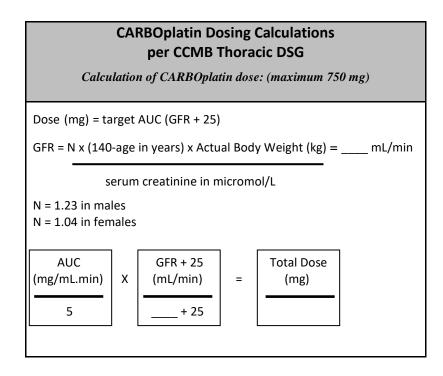
# **DISCHARGE INSTRUCTIONS**

- Instruct patient to continue taking folic acid, dexamethasone and anti-emetic(s) at home
- vitamin B12 is part of this treatment regimen. Patient should notify clinic if they are receiving vitamin B12 for other indications
- Reinforce applicable safe handling precautions of medications, blood and body fluids for 48 hours after completion of chemotherapy



# ADDITIONAL INFORMATION

- folic acid, vitamin B12 and dexamethasone are prescribed to decrease PEMEtrexed toxicity
- dexamethasone is also prescribed post treatment for delayed nausea
- Non-Steroidal Anti-Inflammatory drugs (NSAIDs) may increase the toxicity of PEMEtrexed. Hold NSAIDs for 2 days before, the day of and for 2 days after PEMEtrexed
- Support protocol under **PEME Support (NSCLC)** in the "Lung Cancer" folder is to be used to order folic acid and the first dose of vitamin B12
- CARBOplatin dose considerations:
  - o CCMB Thoracic DSG uses actual body weight to calculate GFR
  - o CCMB Thoracic DSG uses a maximum CARBOplatin dose of 750 mg for this regimen
  - If calculated CARBOplatin dose differs more than 10% from prescribed CARBOplatin dose, contact the prescriber



#### AUC= Area Under Curve

The estimated creatinine clearance is based on limited evidence. Sound clinical judgment and interpretation of the estimation are required, because the equations above may not be appropriate for some patient populations (for example, acute renal failure)

