

## Chemocare prescription V1.04

## Page:1 of 6

Surname

## Protocol

## PEMETREXED + CISPLATIN

Weight (kg)

Patient NO

Local No.

Course Name:

## Pemetrexed + Cisplatin cycle 1

Consultant

Ward

Type of line

No. of lumen:

SINGLE LINE

## Diagnosis

Non small cell lung cancer

NHS No

### **Additional Prescribing Notes**

Proceed when urine output >100ml/hr

Encourage patient to drink 1-2 litres of fluid over 6 hours after IV fluids are complete

To be prescribed separately:

Hydroxocobalamin (vitamin B12) IM injection 1mg to be administered 7 days prior to cycle 1 of chemotherapy and once every 9 weeks thereafter until 3 weeks after the last dose of pemetrexed (subsequent vitamin B12 injections may be given on the same day as pemetrexed.)

To be prescribed separately (cycle 1 only):

- 1) prescribe folic acid 400micrograms for cycle 1 separately, subsequent doses will be prescribed via chemocare. To be taken daily commencing at least 7 days prior to cycle 1 of chemotherapy and dosing must continue during the full course of chemotherapy and for 21 days after the last dose of pemetrexed.
- 2) prescribe oral dexamethasone for cycle 1 separately subsequent doses will be supplied via chemocare

Aspirin and all other NSAID's must be stopped for 5 days, commencing 2 days prior to chemotherapy, day of treatment and two days after treatment.

### **Dose Modifications**

For grade 3 toxicity or neutropenic sepsis-

Dose reduce Cisplatin 60mg/m<sup>2</sup> and Pemetrexed to

Allocated by:

**Confirmed by:**

**Authorised by:**

Checked by: (Pharmacist)
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Date:

**Date:**

Date:

Date:

**Chart Id.:**

Parenteral	3
Intrathecal	0
Oral	3

# Parenteral Cytotoxic Chart

Chemocare prescription V1.04

## Patient Details

Forename

Surname

Protocol

DOB

Patient NO

Local No.

Course Name:

Pemetrexed + Cisplatin cycle 1

NHS No

Ward

SA (m²)

Height (m)

Weight (kg)

Page:2 of 6

Monitoring	Acceptable Range		Date Due	Date of Test	Value	Checked	<div>Additional Prescribing Notes</div> <div>400mg/m2</div> <div>If pre-treatment EDTA GFR is &lt;60mls/min discuss with consultant</div>

Day	Date and Time	Drug and dose (per m2) or dose (per kg)	ACTUAL DOSE	Infusion Fluid and Final Volume	Route	Additives	Time/Infusion Rate	Line	Given/Checked by	Time Start/Stop	Comments
1	T=hrs	FREE FLOWING INFUSION (500ml)	500 ml	SODIUM CHLORIDE 0.9%	IV				<div></div> <div>Batch No.</div>	<div></div>	
1	T=hrs	PRE HYDRATION (1000ml)		SOD CHLOR 0.9%+ POT CHLOR 0.15%+ MAG SULPH 10mmol per litre 1000 ml	IV		Infuse over 2 Hrs at a rate 500 ml/hr		<div></div> <div>Batch No.</div>	<div></div>	
1	T=hrs	APREPITANT (125mg)	125 mg	None	PO				<div></div> <div>Batch No.</div>	<div></div>	To be given 1 hour before cisplatin
1	T=hrs	ONDANSETRON (8mg)	8 mg	None	PO				<div></div> <div>Batch No.</div>	<div></div>	
1	T=hrs	PEMETREXED (500mg/m²)	mg	SODIUM CHLORIDE 0.9% 100 ml	IV		Infuse over 10 Mins at a rate 600 ml/hr		<div></div> <div>Batch No.</div>	<div></div>	
1	T=hrs	FUROSEMIDE (20mg)	20 mg		IV		Slow Bolus		<div></div> <div>Batch No.</div>	<div></div>	

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Date:

Chart Id.:

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Patient Details

Forename

Surname

Protocol

DOB

Patient NO

Local No.

Course Name:

Pemetrexed + Cisplatin cycle 1

NHS No

Ward

SA (m²)

Height (m)

Weight (kg)

Day	Date and Time	Drug and dose (per m2) or dose (per kg)	ACTUAL DOSE	Infusion Fluid and Final Volume	Route	Additives	Time/Infusion Rate	Line	Given/ Checked by	Time Start/ Stop	Comments
1	T=hrs	CISPLATIN (75mg/m²)	mg	SODIUM CHLORIDE 0.9% 1000 ml	IV		Infuse over 2 Hrs at a rate 500 ml/hr		<div></div> <div>Batch No.</div>	<div></div> <div></div>	
1	T=hrs	POSTHYDRATION (1000ml)		SOD CHLOR 0.9%+ POT CHLOR 0.15%+ MAG SULPH 10mmol per litre 1000 ml	IV		Infuse over 2 Hrs at a rate 500 ml/hr		<div></div> <div>Batch No.</div>	<div></div> <div></div>	

Allocated by:

Confirmed by:

Authorised by:

Checked by: (Pharmacist)

Date:

Date:

Date:

Date:

Chart Id.:

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Patient Details

Forename	Surname		Protocol	PEMETREXED + CISPLATIN					SA (m²)				
			Course Name	Pemetrexed + Cisplatin cycle 1					Height (m)				
DOB	Patient NO		Local No.		NHS No							Weight (kg)	
Consultant			Ward		Diagnosis		Non small cell lung cancer						
Address													

Record drug allergies or sensitivities

				Time	Date													
Drug & dose	FOLIC ACID																	
Actual dose	400 microgram		Duration	21 DAYS														
Route	PO		Start Date															
Frequency	OD		Start Day	1														
Quantity Dispensed		Dispensed by																
		Accuracy check																
Note	A strip of 30 tablets may be dispensed.																	
Drug & dose	ONDANSETRON																	
Actual dose	8 mg		Duration	2 DAYS														
Route	PO		Start Date															
Frequency	BD		Start Day	1														
Quantity Dispensed		Dispensed by																
		Accuracy check																
Note	If pre-pack supplied record Batch Number : _____.																	

Allocated by:	Confirmed by:	Authorised by:	Checked by: (Pharmacist)	Chart Id.:
Date:	Date:	Date:	Date:	
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Patient Details

Forename	Surname		Protocol	PEMETREXED + CISPLATIN					SA (m²)	
			Course Name	Pemetrexed + Cisplatin cycle 1					Height (m)	
DOB	Patient NO	Local No.		NHS No						Weight (kg)
		Ward								
Address										

Record drug allergies or sensitivities

				Time	Date													
Drug & dose	METOCLOPRAMIDE																	
Actual dose	10 mg	Duration	PRN															
Route	PO	Start Date																
Frequency	TDS	Start Day	1															
Quantity Dispensed		Dispensed by																
		Accuracy check																
Note	If pre-pack supplied record Batch Number : _____.																	
Drug & dose	APREPITANT																	
Actual dose	80 mg	Duration	2 DAYS															
Route	PO	Start Date																
Frequency	DAILY	Start Day	2															
Quantity Dispensed		Dispensed by																
		Accuracy check																
Note	If pre-pack supplied record Batch Number : _____.																	

Allocated by:	Confirmed by:	Authorised by:	Checked by: (Pharmacist)	Chart Id.:
Date:	Date:	Date:	Date:	
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Patient Details

Forename	Surname		Protocol	PEMETREXED + CISPLATIN					SA (m²)	
			Course Name	Pemetrexed + Cisplatin cycle 1					Height (m)	
DOB		Local No.	NHS No						Weight (kg)	
		Ward								
Address										

Record drug allergies or sensitivities

				Time	Date													
Drug & dose	DEXAMETHASONE																	
Actual dose	4 mg	Duration	3 DAYS															
Route	PO	Start Date																
Frequency	BD	Start Day	21															
Quantity Dispensed	Dispensed by																	
	Accuracy check																	
Note	To be taken for 3 days starting 24 hours prior to next course of chemotherapy. If pre-pack supplied record Batch Number : _____.																	

Allocated by:	Confirmed by:	Authorised by:	Checked by: (Pharmacist)	Chart Id.:
Date:	Date:	Date:	Date:	
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