

## Regimen Reference Order

### GAST – DOCETaxel + CISplatin + fluorouracil (modified DCF)

ARIA: GAST - [mod DCF]

**Planned Course:** Every 14 days until disease progression (usual 8 cycles)

**Indication for Use:** Anal Squamous Cell Carcinoma Metastatic

**CVAD:** Required (Ambulatory Pump)

**Proceed with treatment if:**

- ANC equal to or greater than  $1.5 \times 10^9/L$  AND Platelets equal to or greater than  $100 \times 10^9/L$
  - Creatinine clearance equal to or greater than 45 mL/minute
- ❖ Contact Physician if parameters not met

### SEQUENCE OF MEDICATION ADMINISTRATION

#### Pre-treatment Requirements

Drug	Dose	CCMB Administration Guideline
Instruct patient to start vigorous oral pre-hydration (600-900 mL) the morning of treatment <b>(Self-administered at home)</b>		
dexamethasone	8 mg	Orally twice daily the day before DOCETaxel treatment and one dose the morning of DOCETaxel treatment <b>(Self-administered at home)</b> <i>*Nursing Alert: Notify physician if patient has not taken dexamethasone. dexamethasone is prescribed to prevent infusion reactions</i>

#### Treatment Regimen – GAST – DOCETaxel + CISplatin + fluorouracil (modified DCF)

Establish primary solution 500 mL of: normal saline		
Drug	Dose	CCMB Administration Guideline
aprepitant	125 mg	Orally 1 hour pre-chemotherapy
ondansetron	16 mg	Orally 30 minutes pre-chemotherapy
DOCETaxel	40 mg/m <sup>2</sup>	IV in normal saline 250 mL over 1 hour, following the administration rates below: <ul style="list-style-type: none"> <li>• Administer at 100 mL/hour for 15 minutes, then</li> <li>• Administer remaining volume over 45 minutes</li> </ul> <i>Use non-DEHP bags and non-DEHP administration sets</i>
normal saline	100 mL	<b>ONLY</b> for patients with a PORT IV over 12 minutes <i>*Nursing Alert: This volume is to be administered after standard flush</i>

CISplatin	40 mg/m <sup>2</sup>	IV in normal saline 250 mL over 1 hour
fluorouracil	2400 mg/m <sup>2</sup>	IV in D5W continuously over 46 hours by ambulatory infusion device
All doses will be automatically rounded that fall within CCMB Approved Dose Bands. See Dose 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, bilirubin and albumin as per Physician Orders
- Full vital signs (temperature, heart rate, respiratory rate, blood pressure and O<sub>2</sub> saturation) at baseline and as clinically indicated
- No observation period required after DOCEtaxel administration. Patient can be discharged from treatment room if stable whether they had a reaction or not

## 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
metoclopramide	10 – 20 mg	Orally as needed every 4 hours 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 and to maintain oral intake of 2000 mL (8 glasses) of fluid daily at home
- Ensure patient has received a home chemotherapy spill kit and instructions for use
- Reinforce applicable safe handling precautions of medications, blood and body fluids for 48 hours after completion of chemotherapy

## ADDITIONAL INFORMATION

- CISplatin is ototoxic and nephrotoxic
- CISplatin can cause hypomagnesemia