

Parenteral Cytotoxic Chart

Chemocare prescription V1.07

Patient Details

Forename

Surname

Protocol

FEC 75 BREAST CANCER

Anyroad,Anytown,

DOB

Patient NO

Local No.

Course Name:

FEC 75 (Breast Ca)

Consultant

Ward

Type of line

No. of lumen:

Diagnosis

Carcinoma of Breast

NHS No

SA (m²)

Height (m)

Weight (kg)

Monitoring	Acceptable Range		Date Due	Date of Test	Value	Checked
Height (m)						
Weight (kg)						
SA (m²)						
NEUTROPHILS > 1.0	1.00	15.00	Day [1]			
PLATELETS > 100	100.00	600.00	Day [1]			

Additional Prescribing Notes

CARDIAC TOXICITY: Refer to protocol description for monitoring requirements.
Previous Liver function tests to be reviewed before each dose, refer to prescriber if ALT >2.5ULN,or Bili >1.5ULN, or AST>2.5ULN. Results checked by _____

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	ONDANSETRON (8mg)	8 mg	None	PO				<div></div> <div>Batch No.</div>	<div></div>	
1	T=hrs	DEXAMETHASONE (8mg)	8 mg	None	PO				<div></div> <div>Batch No.</div>	<div></div>	
1	T=hrs	EPIRUBICIN (75mg/m²)	mg	None	IV		Slow Bolus		<div></div> <div>Batch No.</div>	<div></div>	
1	T=hrs	CYCLOPHOSPHAMIDE (600mg/m²)	mg	None	IV		Slow Bolus		<div></div> <div>Batch No.</div>	<div></div>	

Allocated by:

Date:

Confirmed by:

Date:

Authorised by:

Date:

Checked by: (Pharmacist)

Date:

Chart Id.:

Parenteral

Intrathecal

Oral

2

0

2

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FEC 75 BREAST CANCER

SA (m²)

Height (m)

Weight (kg)

Anyroad,Anytown,

DOB

Patient NO

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Course Name:

FEC 75 (Breast Ca)

Ward

NHS No

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	08/09/2015	FLUOROURACIL		None	IV		Slow Bolus				
	T=hrs	(600mg/m²)	mg						Batch No.		

Allocated by:

Confirmed by:

Authorised by:

Checked by: (Pharmacist)

Date:

Date:

Date:

Date:

Chart Id.:

Patient Details

Forename	Surname		Protocol	FEC 75 BREAST CANCER						SA (m²)		
			Course Name	FEC 75 (Breast Ca)						Height (m)		
DOB	Patient NO	Local No.		NHS No							Weight (kg)	
Consultant		Ward		Diagnosis	Carcinoma of Breast							
Address												

Record drug allergies or sensitivities

				Time	Date													
Drug & dose	ONDANSETRON																	
Actual dose	8 mg	Duration	FOUR DOSES															
Route	PO	Start Date																
Frequency	BD	Start Day	1															
Quantity Dispensed		Dispensed by																
		Accuracy check																
Note	If pre-pack supplied record Batch Number : _____.																	
Drug & dose	DEXAMETHASONE																	
Actual dose	4 mg	Duration	TWO DOSES															
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:	

Patient Details

Forename	Surname		Protocol	FEC 75 BREAST CANCER					SA (m²)		
			Course Name	FEC 75 (Breast Ca)					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	Metoclopramide 10mg tablets are prescribed with each cycle, discuss with patient and delete if supply not required. If pre-pack supplied record Batch Number : _____.																	

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