

Parenteral Cytotoxic Chart

Chemocare prescription V1.02

Patient Details

Forename

Surname

Protocol

CAPECITABINE + BEVACIZUMAB

SA (m²)

DOB

Patient NO

Local No.

Course Name:

CAPECITABINE 1250mg/m2 BD + Bevacizumab 7.5mg/kg

Height (m)

Consultant

Ward

Type of line

Diagnosis

No. of lumen:

NHS No

000 000 0000

Monitoring	Acceptable Range		Date Due	Date of Test	Value	Checked
Height (m)						
Weight (kg)						
SA (m²)						
ALA TRANSAM2.5ULN	0.00	100.00	Day [1]			
BILIRUBIN 1.5ULN	0.00	31.50	Day [1]			
Cockcroft >50mls/min	50.00	300.00	Day [1]			
NEUTROPHILS > 1.0	1.00	15.00	Day [1]			
PLATELETS> 75	75.00	600.00	Day [1]			

Additional Prescribing Notes

Bevacizumab
Initial dose should be administered over 90 minutes, if well tolerated the second dose should be administered over 60 minutes and if well tolerated subsequent infusions should be administered over 30 minutes. Final concentration of bevacizumab in sodium chloride 0.9% should be between 1.4mg/ml and 16.5mg/ml

Bevacizumab is incompatible with glucose 5%, flush with sodium chloride 0.9%

Blood pressure and proteinuria by dipstick analysis should be monitored prior to each initial treatment and dose of bevacizumab

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	BEVACIZUMAB (7.5mg/kg)	462.5 mg	SODIUM CHLORIDE 0.9% 100 ml	IV				<div><div></div><div>Batch No.</div></div>	<div><div></div><div></div></div>	1st dose over 90 minutes then if well tolerated 2nd dose over 60 minutes then if well tolerated subsequent doses over 30 minutes.

Allocated by:

Confirmed by:

Authorised by:

Checked by: (Pharmacist)

Parenteral

Intrathecal

Oral

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Date:

Date:

Date:

Date:

Chart Id.:

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Patient Details

Forename	Surname		Protocol	CAPECITABINE + BEVACIZUMAB										SA (m²)		
			Course Name	CAPECITABINE 1250mg/m2 BD + Bevacizumab 7.5mg/kg										Height (m)		
DOB	Patient NO		Local No.		NHS No								Weight (kg)			
Consultant			Ward		Diagnosis											
Address																

Record drug allergies or sensitivities

				Time	Date													
Drug & dose	CAPECITABINE																	
Actual dose			Duration	14 DAYS														
Route	PO		Start Date															
Frequency	BD		Start Day	1														
Quantity Dispensed			Dispensed by															
			Accuracy check															
Note	500mg tabs- Take tabs each morning and each evening for 14 days. 150mg tabs- Take tabs each morning and each evening for 14 days. Supplyx 500mg Supplyx 150mg																	
Drug & dose	METOCLOPRAMIDE																	
Actual dose	10 mg		Duration	PRN														
Route	PO		Start Date	06/04/2016														
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:	
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