



Provincial Health Services Authority

Information on this form is a guide only. User will be solely responsible for verifying its currency and accuracy with the corresponding BC Cancer treatment protocols located at www.bccancer.bc.ca and according to acceptable standards of care

PROTOCOL CODE: HNAVCAP

(Page 1 of 1)

DOCTOR'S ORDERS		Ht _____ cm	Wt _____ kg	BSA _____ m ²
REMINDER: Please ensure drug allergies and previous bleomycin are documented on the Allergy & Alert Form				
DATE:	To be given:	Cycle #:		
Date of Previous Cycle:				
<input type="checkbox"/> Delay treatment _____ week(s) <input type="checkbox"/> CBC & Diff, platelets, creatinine day of treatment May proceed with doses as written if within 96 hours ANC greater than or equal to 1.5 x 10⁹/L, Platelets greater than or equal to 75 x 10⁹/L, Creatinine Clearance greater than or equal to 50 mL/min. Dose modification for: <input type="checkbox"/> Age/ECOG <input type="checkbox"/> Hematology <input type="checkbox"/> Other Toxicity _____ Proceed with treatment based on blood work from _____				
CHEMOTHERAPY:				
capecitabine 1250 mg/m ² or 1000 mg/m ² (circle one) x BSA x (_____ %) = _____ mg PO BID x 14 days on days 1 to 14. (refer to Capecitabine Suggested Tablet Combination Table for dose rounding)				
RETURN APPOINTMENT ORDERS				
<input type="checkbox"/> Return in three weeks for Doctor and Cycle _____ <input type="checkbox"/> Last Cycle. Return in _____ week(s).				
CBC & Diff, Platelets, and Creatinine prior to each cycle. If Clinically Indicated: <input type="checkbox"/> Tot. Prot <input type="checkbox"/> Albumin <input type="checkbox"/> Bilirubin <input type="checkbox"/> GGT <input type="checkbox"/> Alk Phos. <input type="checkbox"/> ALT <input type="checkbox"/> LDH <input type="checkbox"/> BUN <input type="checkbox"/> Other tests: <input type="checkbox"/> Weekly nursing assessment <input type="checkbox"/> Consults: <input type="checkbox"/> See general orders sheet for further orders				
DOCTOR'S SIGNATURE:		SIGNATURE:		
		UC:		