**REGIMEN/PROTOCOL:** DOXORUBICIN + BLEOMYCIN + VINBLASTINE + DACARBAZINE (ABVD) (Every 28 days)

**PRIMARY DIAGNOSIS:** □ Lymphoma, Hodgkin’s Disease □ Other*:

*When selecting other diagnosis please provide protocol

**ALLERGIES/REACTIONS:**

Goal of Chemotherapy: □ Curative □ Palliative □ Neoadjuvant □ Adjuvant

MD to indicate which weight to use: □ Actual □ Ideal □ Adjusted

<table>
<thead>
<tr>
<th>HEIGHT (cm):</th>
<th>ACTUAL WEIGHT (kg): and BSA (m²):</th>
<th>IDEAL WEIGHT (kg): and BSA (m²):</th>
<th>ADJUSTED WEIGHT (kg): and BSA (m²):</th>
</tr>
</thead>
</table>

---

Dosing calculations to be completed by Pharmacist:

<table>
<thead>
<tr>
<th>CHEMOTHERAPY</th>
<th>MEDICATION ORDERS</th>
<th>DOSE (mg/m²)</th>
<th>BSA (m²)</th>
<th>DOSE TO BE GIVEN</th>
<th>ROUTE</th>
<th>INFUSE OVER</th>
<th>DATE(S) AND FREQUENCY</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Bleomycin</td>
<td>10 units/ m²</td>
<td>x</td>
<td>=</td>
<td>IV</td>
<td>15 minutes</td>
<td>Days 1 and 15</td>
</tr>
<tr>
<td></td>
<td>Doxorubicin</td>
<td>25 mg/ m²</td>
<td>x</td>
<td>=</td>
<td>IV</td>
<td>20 minutes</td>
<td>Days 1 and 15</td>
</tr>
<tr>
<td></td>
<td>Vinblastine</td>
<td>6 mg/ m²</td>
<td>x</td>
<td>=</td>
<td>IV</td>
<td>15 minutes</td>
<td>Days 1 and 15</td>
</tr>
<tr>
<td></td>
<td>Dacarbazine</td>
<td>375 mg/m²</td>
<td>x</td>
<td>=</td>
<td>IV</td>
<td>30 minutes</td>
<td>Days 1 and 15</td>
</tr>
</tbody>
</table>

**HYDRATION ORDERS**

- **Before Chemotherapy:**
  - Pre-chemo hydration optional if hydrated 1.5-2 Liters before or low risk for tumor lysis syndrome

- **During Chemotherapy:**
  - 0.9% sodium chloride (Normal Saline)
  - 150 ml/hour
  - During chemo only

- **After Chemotherapy:**

**HOLD CHEMOTHERAPY FOR THE FOLLOWING REASONS:**

- Absolute Neutrophil Count (ANC) Less Than ________________ (typically less than 1,000)
- Platelets Less Than ________________ (typically less than 100,000)
- Other:

Physician Initial: ____________________________
PHYSICIAN ORDERS

CHEMOTHERAPY:

DOXORUBICIN + BLEOMYCIN + VINBLASTINE + DACARBAZINE (ABVD)

PATIENT INFORMATION

PHARMACY TO MANAGE ANTIEMETICS

<table>
<thead>
<tr>
<th>ANTIEMETIC ORDERS/DRUG NAME</th>
<th>DOSE</th>
<th>ROUTE</th>
<th>TIMING</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ondansetron</td>
<td>24 mg</td>
<td>PO</td>
<td>30 minutes pre-chemo (Day 1, 15)</td>
</tr>
<tr>
<td>Granisetron</td>
<td>2 mg</td>
<td>PO</td>
<td>30 minutes pre-chemo (Day 1, 15)</td>
</tr>
<tr>
<td>Palonosetron</td>
<td>0.25 mg</td>
<td>IV</td>
<td>30 minutes pre-chemo (Day 1, 15)</td>
</tr>
<tr>
<td>Dexamethasone</td>
<td>12 mg</td>
<td>PO</td>
<td>30 minutes pre-chemo (Day 1, 15) THEN Daily (Days 2, 16) THEN twice daily (Days 3-4 and Days 17-18)</td>
</tr>
<tr>
<td></td>
<td>8 mg</td>
<td>PO</td>
<td></td>
</tr>
<tr>
<td>Fosaprepitant</td>
<td>150 mg</td>
<td>IV</td>
<td>30 minutes pre-chemo (Days 1, 15)</td>
</tr>
<tr>
<td>Lorazepam</td>
<td>0.5-1 mg</td>
<td>PO</td>
<td>30 minutes pre-chemo times 1 dose PRN anxiety</td>
</tr>
</tbody>
</table>

NOTE: Number the antiemetics below in the order to be used. The nurse will select #1 as the first medication to be given and may alternate #2. If orders chosen are not numbered, the nurse will contact the prescriber for clarification.

PRN ANTIEMETICS (FOR INPATIENT USE)

Lorazepam 0.5-1 mg IV Every 4 hours PRN nausea/vomiting/anxiety
Promethazine 12.5-25 mg or 6.25-12.5 mg** IV Every 4 hours PRN nausea/vomiting

Outpatient Prescription(s): (for outpatients or early discharge)

** For patients 65 years old and greater

TESTS:

- MUGA Scan
- ECG

INPATIENT LABS

NOW: CBC BMP CMP Other
DAILY: CBC BMP CMP Other

OUTPATIENT LABS:

BEFORE EACH CYCLE: CBC BMP CMP Other
FOR DAY 15: CBC BMP CMP Other

OTHER LABS AND FREQUENCY:

- Urine Output: If urine output is less than give times days
  - Nurse May Initiate CVAD Management Per Nursing Protocol #910.00
  - Nurse May Utilize Local Anesthetic For CVAD Access Per Nursing Protocol #788
  - Nurse May Initiate IV Catheter Care, Outpatient Physician Order #858
  - For Infusion Reactions Initiate Drug Related Hypersensitivity Physician Order #774

MEDICATIONS:

- Allopurinol 300 mg PO daily
- Acetaminophen 650 mg PO times 1 dose prior to IV bleomycin

Other:

NOTE: These orders should be reviewed by the attending physician, appropriately modified for the individual patient, dated and signed below.

DATE TIME PHARMACIST’S SIGNATURE
DATE TIME PHYSICIAN’S SIGNATURE

Another brand of drug, identical in form and content, may be dispensed unless checked.

Franciscan Health System
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