



مركز الكويت لمكافحة السرطان
Kuwait Cancer Control Center

GEMcitabine / PACLitaxel (weekly)



* G E M P C L - 0 0 - 0 4 - 0 6 - B R *



Ministry of Health

Name:

File #:

Ht (cm):

Nationality:

Civil ID:

Wt (Kg):

Gender/Age:

DOB:

BSA (m²):

Indication(s): Metastatic breast cancer, second line

Central line: Available NA

Allergies: NKA Yes, specify; _____

Parameters: Initiate treatment only if ANC ≥ 1500; HB ≥ 80; Plt ≥ 100,000; CrCl > 45 ml/min.

Pre-treatment Medications: (30-60 min before starting treatment)

Ondansetron 8 mg PO/IV
Dexamethasone 12 mg PO/IV
Chlorphenamine 10 mg PO/IV

Standard Protocol:

DRUG	DOSE	ADMINISTRATION	DAYS
GEMcitabine	800-1000 mg/m ²	IV in 250 mL NS over 30 min.	D1, 8, 15
PACLitaxel	80 mg/m ²	IV In 500 mL D5W glass bottle over 60 min.	D1, 8, 15

To be repeated every 4 weeks for 6 cycles.

Treatment Description:

Cycle	Day	Date	GEMcitabine	PACLitaxel	Physician	Consultant
C# __	D1					
	D8					
	D15					

Cycle	Day	Date	GEMcitabine	PACLitaxel	Physician	Consultant
C# __	D1					
	D8					
	D15					

Important Notes:

Reported grade 3/4 toxicities: None Hematological Non-Hematological

If yes; Did it indicate hospitalization? Yes No

Did it indicate chemo-delay for ≥ 7 days? Yes No

Did it indicate dose reduction? Yes No

Did it indicate G-CSF support? Yes No