TRASTuzumab + PERTuzumab







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Name: Nationality: Gender/Age:			Ci	File #: Civil ID: DOB:		Ht (cm): Wt (Kg): BSA (m²):
Indication(s): HER2 +ve breast cancer, Neoadjuvant / Adjuvant / Palliative Central line: □ Available □ NA Allergies: □ NKA □ Yes, specify;						
Parameters: Baseline ECHO and/or MUGA scan before initiation of Anti-HER2 therapy. Then, every 3 months during and upon completion of Anti-HER2 therapy. Then, every 6 months for at least 2 years following completion of Anti-HER2 therapy.						
Standard Protocol:						
DRUG		DOSE		ADMINISTRATION		DAYS
TRASTuzumab		8 mg/kg (Loading dose)		IV in 250 mL NS over 90 min.		1st dose only
PERTuzumab		840 mg (Loading dose)		IV in 250 mL NS over 60 min.		1st dose only
TRASTuzumab		6 mg/kg (Maintenance)		IV in 250 mL NS over 30 min.		D1
PERTuzumab		420 mg (Maintenance)		IV in 250 mL NS over 60 min.		D1
 □ Neodjuvant: to be repeated every 3 weeks for 4-6 cycles. □ Adjuvant: to be repeated every 3 weeks for 1 year. □ Palliative: to be repeated every 3 weeks until disease progression or intolerable toxicity. 						
Treatment Description:						
Cycle	Date	TRASTuzumab	PERTuzumab	LVEF	Physician	Consultant
C#						
C#						
C#						
C#						
C#						
C#						
•	ed grade 3/ Did it indic Did it indic Did it indic	4 toxicities:	? □ or ≥ 7 days? □ ? □	ological	Hematological	