



مركز الكويت لمكافحة السرطان
Kuwait Cancer Control Center

DCF (B) (DOCEtaxel / CISplatin / 5-Fluorouracil)



Ministry of Health

Name:

File #:

Ht (cm):

Nationality:

Civil ID:

Wt (Kg):

Gender/Age:

DOB:

BSA (m²):

Indication(s): Gastric cancer, metastatic or locally advanced.

Central line: Available NA

Allergies: NKA Yes, specify; _____

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

Preparatory Medications:

Dexamethazone tab 8 mg at 12, 6, and 2 hrs before DOCEtaxel.

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

Akynzeo 1 Capsule PO (300 mg NETUpitant/0.5 mg PALONOssetron) on Day 1

Dexamethasone 10 mg PO/IV

Chlorphenamine 10 mg PO/IV

Standard Protocol:

DRUG	DOSE	ADMINISTRATION	DAYS
DOCEtaxel	40 mg/m ²	IV In 250 mL NS over 60 min.	D1
CISplatin	40 mg/m ²	IV in 250 mL NS over 60 min.	D3
Leucovorin	400 mg/m ²	IV In 250 mL NS over 15 min.	D1
5-FU (bolus)	400 mg/m ²	ForIV In 250 mL NS over 15 min.	D1
5-FU (infusion)	2000 mg/m ²	For outpatient: continuous infusion via 5-FU pump or For inpatient: IV in 1000 mL NS over 46 hr	D1, 2

To be repeated every 2 weeks for 6 cycles.

Special instructions: The appropriate Dose Band INFUSOR for 5-FU will be applied accordingly.

Treatment Description:

Pre-hydration: 500 mL NS IV over 30 min.

Cycle	Day	Date	DOCEtaxel	CISplatin	Leucovorin	5-FU (bolus)	5-FU (infusion)
C# __	D1			XXXXXXXX			
	D2		XXXXXXXX	XXXXXXXX	XXXXXXXX	XXXXXXXX	
	D3		XXXXXXXX		XXXXXXXX	XXXXXXXX	XXXXXXXX

Physician (Stamp and signature)

Consultant (Stamp and signature)