



مركز الكويت لمكافحة السرطان
Kuwait Cancer Control Center

FUFA

5-Fluorouracil / Folinic acid



Ministry of Health

Name:

File #:

Ht (cm):

Nationality:

Civil ID:

Wt (Kg):

Gender/Age:

DOB:

BSA (m²):

Indication(s): Pancreatic cancer, adjuvant.

Colorectal cancer (stage B or C), adjuvant.

Central line: Available NA

Allergies: NKA Yes, specify; _____

Parameters: Initiate treatment only if ANC \geq 1500; HB \geq 80; Plt \geq 75,000; CrCl $>$ 45 ml/min.

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

Ondansetron 8 mg PO/IV

Dexamethasone 10 mg PO/IV

Standard Protocol:

DRUG	DOSE	ADMINISTRATION	DAYS
Leucovorin	20 mg/m ²	IV in 250 mL NS over 15 min - prior to 5-FU.	D1, 2, 3, 4, 5
5-FU (infusion)	425 mg/m ²	IV in 250 mL NS over 15 min.	D1, 2, 3, 4, 5
To be repeated every 4 week for 6 cycles.			

Treatment Description:

Cycle	Day	Date	Leucovorin	5-FU
C# __	D1			
	D2			
	D3			
	D4			
	D5			

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 \geq 7 days? Yes No

Did it indicate dose reduction? Yes No

Did it indicate G-CSF support? Yes No

Physician (Stamp and signature)

Consultant (Stamp and signature)