



مركز الكويت لمكافحة السرطان
Kuwait Cancer Control Center

High-dose Methotrexate with Leucovorin Rescue (RESTRICTED TO INPATIENT SETTING ONLY)



Ministry of Health

Name:

File #:

Ht (cm):

Nationality:

Civil ID:

Wt (Kg):

Gender/Age:

DOB:

BSA (m²):

Indication(s): Resectable osteosarcoma, alternating with DOXOrubicin / CISplatin.
 Metastatic Or locally recurrent osteosarcoma who had previously received DOXOrubicin / CISplatin And/Or IFOSFamide / ETOposide.

Central line: Available NA **Allergies:** NKA Yes, specify; _____

Parameters: Initiate treatment only if ANC \geq 1500; HB \geq 90; Plt \geq 75, 0; Serum creatinine $<$ 150 umol/L; CrCl $>$ 45 ml/min; ALT, Alk Phos Or total bilirubin less than 2 x UL; Urine pH $>$ 7.

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

Standard Protocol:

DRUG	DOSE	ADMINISTRATION	DAYS
Methotrexate	12 g/m ² (max 20 gm)	IV in 1 L D5W over 4 hrs. Start only if urine pH $>$ 7.	D1
Leucovorin	15 mg/m ²	IV In 50 mL D5W over 10 min, to be repeated every 6 hrs until MTX level $<$ 0.1 umol/L. starting exactly 24 hours after initiation of MTX infusion.	D2
To be repeated according to the roadmap.			

Special instructions: Avoid concurrent use of: NSAIDs, Proton Pump Inhibitors, Penicillins, CIPROfloxacin, and Co-Trimoxazole.

Treatment Description:

Pre-MTX hydration & alkalinization: (To be started 24hrs before MTX infusion, date/time: _____)
- 1 Liter DNS + NaHCO₃ 50 mEq + KCl 20 mEq IV inf. rate: 150mL/hr, to be repeated every 6hrs.
- Check urine pH every 6hrs. Once urine pH $>$ 7, temporary hold IV fluids and start MTX infusion.

Chemotherapy:

Cycle	Day	Date	Methotrexate	Leucovorin
C# __	D1			XXXXXXXX
	D2		XXXXXXXX	

Post-MTX hydration:

- After completion of MTX, resume IV hydration immediately with 1 Liter DNS + NaHCO₃ 50 mEq + KCl 20 mEq IV inf. rate: 150mL/hr, to be repeated every 6hrs until urine pH $>$ 7.0 and MTX level $<$ 0.1 umol/L.
- Check urine pH every 6hrs.
- Check MTX level every morning starting on day 2.
- Never discharge unless MTX level $<$ 0.1 umol/L.

Physician (Stamp and signature)

Consultant (Stamp and signature)