



مركز الكويت لمكافحة السرطان  
Kuwait Cancer Control Center

# Sandostatin LAR



Ministry of Health

Name:

File #:

Ht (cm):

Nationality:

Civil ID:

Wt (Kg):

Gender/Age:

DOB:

BSA (m<sup>2</sup>):

Indication(s): Advanced Neuroendocrine Tumors.

Central line:  Available  NA

Allergies:  NKA  Yes, specify; \_\_\_\_\_

## Standard Protocol:

DRUG	DOSE	ADMINISTRATION	DAYS
Sandostatin LAR	30 mcg	IM intragluteal.	D1
<b>To be repeated every 4 weeks until disease progression or intolerable toxicity.</b>			

## Treatment Description:

Cycle	Date	Sandostatin LAR	Physician	Consultant
C# __				
C# __				
C# __				
C# __				
C# __				
C# __				
C# __				
C# __				
C# __				
C# __				

## 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