

Non Hodgkin Lymphoma (NHL)
R-GDP

Height	cm
Weight	kg
BSA	m ²

Attach patient sticker

Cycle length:	21 days
Cycle no:	
Destination:	

CBC	Day 1	Limits
Date		
Neuts		1.0 X 10 ⁹ /L
Plts		75 X 10 ⁹ /L

Hypersensitivities/Allergies

PRN antiemetics
Domperidone 10 mg PO QID PRN
± Cyclizine 50 mg TDS PO/IV PRN

Agent	Round
Rituximab	50 mg
Gemcitabine	100 mg
Cisplatin	5mg

DOSE MODIFIED: No Yes

Reference: Cancer 15 Oct 2004
Vol 101 (8), 1835-1842

Ensure Hep B serology is performed before rituximab treatment

Day	Date	Time	Agent	Dose	Route	Instructions	Doctor	Nurse	Check	Start	Stop
1-4			Dexamethasone**	40 mg	PO	ONCE daily on days 1-4. Give 30-60 mins prior to rituximab on Day 1. Chart on outpatient script.					
1		T = - 1 hr	Paracetamol	1000 mg	PO	30-60 mins prior to Rituximab					
		T = - 1 hr	Loratadine	20 mg	PO	30-60 mins prior to Rituximab					
		T = 0 hrs	Rituximab 375 mg/m² <i>See infusion chart page 3</i>	mg	IV	<input type="checkbox"/> Standard infusion: added to 500 mL Sodium Chloride 0.9% <input type="checkbox"/> Rapid infusion: added to 500 mL Sodium Chloride 0.9%					

Consultant:
NZMC Reg. No:

Special Authority:
Rituximab:
Aprepitant:

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Day	Date	Time	Agent	Dose	Route	Instructions	Doctor	Nurse	Check	Start	Stop	
1		T= -1h	Aprepitant	125 mg	PO	1 hour prior to chemotherapy						
		T= -1h	Ondansetron	8 mg	PO	1 hour prior to chemotherapy						
			Gemcitabine 1000 mg/m²		mg	IV	In 150 mL sodium chloride 0.9% over 30 minutes					
			Sodium chloride 0.9% 1000 mL + 15 g mannitol			IV	Pre hydration over 1 hour					
			Cisplatin 75 mg/m²		mg	IV	In 1000 mL sodium chloride 0.9% over 1 hour					
			Sodium chloride 0.9%	1000	mL	IV	Post hydration over 1 hour <i>(can be omitted if drinking well and passing urine well)</i>					
		2100	Ondansetron	8 mg	mg	PO	Take on evening of chemotherapy					
Day 2 & 3			Prescribe on an outpatient prescription: Aprepitant 80mg mane & ondansetron 8mg BD									
8		T= -1h	Ondansetron	8 mg	mg	PO	1 hour prior to chemotherapy					
		T= -1h	Dexamethasone	4 mg	mg	PO	1 hour prior to chemotherapy					
			Gemcitabine 1000 mg/m²		mg	IV	In 150 mL sodium chloride 0.9% over 30 minutes					

**** Aprepitant theoretically raises dexamethasone levels by up to 50%. Review if any concern about high steroid doses.**

Rituximab 375 mg/m² administration instructions

Date:	<i>Attach patient label</i>
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Standard infusion:	<p>Commence infusion at 50 mg/hr for the first hour. If no side effects, increase the infusion rate in 50 mg increments every 30 minutes to a maximum rate of 400 mg/hr. Remember that the IV line will have been primed with sodium chloride therefore rituximab will not be infused immediately.</p> <p>To calculate 50mg in ____mL</p> <div style="border: 1px solid black; padding: 5px; width: fit-content; margin-left: auto;"> <p>Total volume of bag X 50 mg = ____mL Total dose in bag</p> </div>
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Rapid infusion:	If no previous toxicities, give 20% of the dose over 30 minutes and the remaining 80% over the following 60 minutes
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If any adverse effects noted:	Discontinue infusion, evaluate severity of symptoms, and treat accordingly. If reactions settle, recommence at HALF the previous rate. Consider hydrocortisone 100 mg IV if required, plus chlorphenamine and paracetamol (depending on time interval).
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Take vital observations as for blood products or as clinically indicated *during infusion*.

Following infusion: Observe for 1 hour following first infusion for delayed reaction. If patient has reacted to first infusion they will need to be observed for 1 hour following subsequent infusions also.

- Note:
- Monitor patients with high tumour burden for infusion related reactions and tumour lysis syndrome.
 - Ensure adequate hydration and consider addition of allopurinol for 1 – 3 courses.

PRN medications for hypersensitivity reactions

Date	Time	Medication	Dose	Route	Doctor	Nurse	Check
		Hydrocortisone	100 mg	Slow IV bolus			
		Paracetamol	1000 mg	PO (If more than 4 hours since last dose)			
		Chlorphenamine	10 mg	Slow IV bolus			

PRN antiemetics

Date	Medication	Dose	Directions	Doctor	Nurse sign			
	Domperidone	10 mg	PO QID PRN					
	Cyclizine	50 mg	PO/IV Q8H PRN					
	Lorazepam	0.5-1 mg	PO BD PRN					