

Canterbury

District Health Board

Te Poari Hauora o Waitaha

Department of Haematology
Bone Marrow Transplant Unit

2 Riccarton Avenue, Christchurch 8011

Phone 03 364 0640

Prescribers Full Name

Prescribers NZMC Registration Number

	Pharmacy stamp
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R-venetoclax for relapsed/refractory CLL - Initial Supply

<u>Venetoclax tablets</u>	Date dispensed	Pharmacist's initials
<p>Instructions: Take 20mg once daily for 7 days, then 50mg once daily for 7 days, then 100mg once daily for 7 days, then 200mg once daily for 7 days, then 400mg once daily thereafter.</p> <p>Supply: 1 x Venclexta® Starter Pack (14 x 10mg tablets, 7 x 50mg tablets, 21 x 100mg tablets)</p> <p>THEN</p> <p>120 x venetoclax 100mg tablets with 1 repeat of 120 x venetoclax 100mg tablets</p> <p>Total = 3 months' supply Special authority required:</p> <p>See venetoclax data sheet page 3 and 4 for guidance around tumour lysis syndrome prophylaxis https://www.medsafe.govt.nz/profs/datasheet/v/venclexatab.pdf</p>		

Please cross off and sign any items not required

Date _____

Signature of Prescriber

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Haematology supportive care (R-venetoclax for CLL)

	Date dispensed	Pharmacist's initials
<u>Allopurinol tablets</u> Take mg once daily with food Supply:		
<u>Valaciclovir 500mg tablets</u> Take 500mg time(s) daily Supply:		
<u>Trimethoprim + Sulfamethoxazole 480mg tablets</u> Take ONE tablet ONCE daily Supply :		
<u>Paracetamol 500mg tablets</u> Take 2 tablets 1 hour prior to each rituximab infusion. Supply:		
<u>Loratadine 10mg tablets</u> Take 2 tablets 1 hour prior to each rituximab infusion. Supply:		
<u>Domperidone 10mg tablets</u> Take 10mg QID PRN Supply:		

Please cross off and sign any items not required

_____ Date _____
Signature of Prescriber