

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 - Ongoing Supply

<u>Venetoclax tablets</u>	Date dispensed	Pharmacist's initials
Take mg once daily Supply: Special authority required:		

Please cross off and sign any items not required

Signature of Prescriber Date _____

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Haematology supportive care (R-venetoclax for CLL)

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

Please cross off and sign any items not required

_____ Date _____
Signature of Prescriber