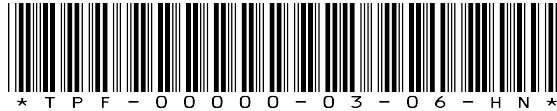




مركز الكويت لمكافحة السرطان  
Kuwait Cancer Control Center

## TPF (DOCEtaxel / CISplatin / 5-Fluorouracil)



\* T P F - 0 0 0 0 0 - 0 3 - 0 6 - H N \*



Ministry of Health

**Name:**

**File #:**

**Ht (cm):**

**Nationality:**

**Civil ID:**

**Wt (Kg):**

**Gender/Age:**

**DOB:**

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

**Approved indication(s):** Locally advanced Head and Neck Cancer as an induction phase

**Central line:**  Available  NA

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

**Parameters:** Initiate treatment only if ANC ≥ 1000; HB ≥ 80; Plt ≥ 100,000; CrCl > 45 ml/min

**Preparatory Medications:**

Dexamethazone tab 8 mg at 12, 6, and 2 hrs before DOCEtaxel

**Pre-treatment Medications:** (30 min before starting treatment)

Ondansetron	8 mg PO/IV
Dexamethasone	12 mg PO/IV
Ranitidine	50 mg PO/IV
Fosaprepitant	150 mg IV in 100 mL NS over 15 min
Chlorphenamine	10 mg PO/IV

**Standard Protocol:**

DRUG	DOSE	INSTRUCTIONS	DAYS
DOCEtaxel	75 mg/m <sup>2</sup>	IV In 500 mL NS over 60 min.	D1
CISplatin	75 mg/m <sup>2</sup>	IV In 1000 mL NS over 60 min.	D1
5-Fluorouracil	1000 mg/m <sup>2</sup>	IV in 1000 mL NS over 22 hr.	D1, 2, 3, 4, 5

**Induction: to be repeated every 3 weeks 3 cycles.**

**Palliative: to be repeated every 3 weeks for 4 - 6 cycles, according to patient tolerance.**

**Treatment Description:**

**Pre-hydration:** 1 Liter NS + KCl 20 mEq + MgSO<sub>4</sub> 8 mEq IV over 1 hrs.

Cycle	DAY	DATE	DOCEtaxel	CISplatin	5-Fluorouracil
C# __	D1				
	D2		XXXXXXXX	XXXXXXXX	
	D3		XXXXXXXX	XXXXXXXX	
	D4		XXXXXXXX	XXXXXXXX	
	D5		XXXXXXXX	XXXXXXXX	

**Post-hydration:** 1 Liter NS IV over 1 hrs followed by 150 mL Mannitol 20% IV bolus.

**Physician** (Stamp and signature):

**Consultant** (Stamp and signature):