











LABELING

CASE REPORT (version 11/2010)

AUDIENCE: Oncology Pharmacists, Pharmacy Technicians, Chemotherapy Nurses.

TARGET BEHAVIOUR: Have access to knowledge of cytotoxics stability duration, possible differences with concentration, storage environment like containers and protection from light.



53 years old female patient, undergoes treatment in Oncology Department with Stage IV Breast Carcinoma Lung Metastasis for nearly one year. While this time, the patient received four times Neoadjuvant CAF protocol, operated and amputated her breast, received two times CEF protocol and finally implemented radiotherapy. Today, Medical Oncology Doctor planned to implement the patient with Paclitaxel+Gemcitabine protocol.

(Weight: 49kg Height: 156cm Body Surface Area: 1.46m²)

Protocol;

Cytotoxic	Dose	Route	Schedule
Paclitaxel	_		1st day / 15th day *
		infusion	
Gemcitabine	1500mg/m2	iv 30 min	1st ve 8th days /
		infusion	15th*

^{*}Repeat every 15th day, after third cure sent patient about a whole diagnose.

PREPARATION:

09:00AM: 220mg Paclitaxel and 250ml %0.9 Saline Solution inserted to the EVA bag; 2190mg Gemcitabine 500ml Saline Solution inserted to the PVC bag. All bags protected from sunlight by secondary Coloured bag and all preparations made under sterile safety cabinet conditions with closed connector systems.

09:30AM: It transported to ward with cold chain.



RECONSTITUTION



FILLING INJECTOR



ADMINISTRATION:

Chemotherapy Nurse checks the patient but cannot find available and sufficient vascular access. She consults to the physician, and they decide to place a Venous Port Catheter under anesthesia to the patient. Nurse sends patient about the related department and placed Chemotherapy bags in ward refrigerator (+4 Celsius).

Venous port catheter places at afternoon and patient goes home. Next day at 09:00AM patient comes. Chemotherapy Nurse makes a phone call with Oncology Pharmacy and asks Pharmacist if she can use the chemotherapy bags that was prepared yesterday and stored at +4 C or not?

Pharmacist answers that there is no disadvantage to use these bags. In this case, nurse administrated whole protocol.

CONCLUSION&DISCUSSION

Oncology Pharmacist's decision is true or false? Why?



VENOUS PORT CATHETER



ADMINISTRATION