PENNSTATE HERSHEY
Cancer Institute

REVISED: March 2011

VD-PACE

Inpatient

Date written _____ To begin _____

Patient's: Height_____cm Weight_____kg BSA_____m^2
Allergies: ☐No ☐Yes: _____
Diagnosis Multiple Myeloma Metastatic Site _____

Protocol:
☐Yes #_____
☐ No
Source of Drug:
☐Routine supply
☐Protocol supply
☐Other

1. Consent Obtained ?
   ☐ Yes : ☐ Preprinted Consent ☐ See Dictated Note ☐ Note in Chart
   ☐ No: Plan: _____

2. ACTIVATE ORDER SET: CHEMO VD-PACE ADULT

3. Premedications: **Hydration:**
   1 L NS with KC1 20 mEq + Magnesium Sulfate 8 mEq over 24 hr Daily x 4 days
   Antiemetics:
   Ondansetron 16 mg PO pre chemo then 8 mg po q12 hourly on days 1-6
   Compazine 10 mg PO w IV prn NIV
4. **Chemotherapy: Must be given via central line**

Bortezomib 1.3 mg/m^2=_____mg IV on days 1, 4, 8, 11

Dexamethasone 40 mg given orally daily on days 1, 2, 3, 4

Doxorubicin 10 mg/ m^2= _____mg given IV in 1L D5W as Continuous Intravenous Infusion over 24 hours daily on days 1-4

Cyclophosphamide 400 mg/m^2=_____mg

Etoposide 40 mg/ m^2= _____mg

Cisplatin _____ mg/ m^2= _____mg

Give cyclophosphamide, etoposide, cisplatin in 1 L NS, as a continuous IV Infusion over 24 hours daily, on days 1-4

Cisplatin guideline:
Patient's current serum creatinine: _____
10 mg/ m^2 for creatinine ≤1.5 mg/dl
5 mg/ m^2 for creatinine 1.6 –2.0 mg/dl
No cisplatin if creatinine >2.0 mg/dl

5. Subsequent Doses: Patient to be seen prior to each cycle by MD, orders will be written for each.
6. Growth Factors:
   Pegfilrastim 6 mg S.C. to be given_____
   (date)

MD/Preparer's Signature _____

Attending signature (required)_____

MR CHEMO ORDER