First consolidation chemotherapy for Acute Promyelocytic Leukemia (PETHEMA PROTOCOL)

Contact Physician: _________________________ Pager: ________

Diagnosis: __________________________________

Cycle: _______ Day 1 = ________ Cycle 1: consent form done □

Weight: ________ Height: ________ BSA: ________

Adjusted IBW: ________ Adjusted BSA: ________

Allergies: __________________________________

*Low risk:  
**Idarubicin** 5mg/m²/day IV bolus daily days 1-4 only

*Intermediate and High risk:
  **Idarubicin** 7mg/m²/day IV bolus daily days 1-4 plus
  **All-trans-retinoic acid (ATRA)** 45mg/m²/day PO in two divided doses days 1-15.
  For patients ≤ 20 years old, then ATRA 25mg/m²/day in two divided doses days 1-15.

1. **Hydration:**

2. **Prophylactic medications:**
   - □ Acyclovir: 400mg PO twice daily
   - □ Antifungal:
   - □ GI prophylaxis:

3. **Anti-emetics:** (Moderate emetogenic potential)
   - □ Ondansetron: 16mg PO daily prior to each dose of idarubicin. May give 16mg IV if unable to tolerate PO.
   - □ Dexamethasone: 10mg PO prior to each dose of idarubicin.
   - □ Lorazepam: 0.5mg - 1 mg PO or IV every 4 hours prn nausea.
   - □ Prochlorperazine 10mg PO or IV every 6 hours prn nausea.
4. Chemotherapy: Choose Low risk vs Intermediate/High risk

☐ Low risk protocol*

- **Idarubicin** (5mg/m²/day) ______ mg IV days 1-4
  - Idarubicin ______ mg IV day 1 ______
  - Idarubicin ______ mg IV day 2 ______
  - Idarubicin ______ mg IV day 3 ______
  - Idarubicin ______ mg IV day 4 ______

☐ Intermediate and High risk protocol*

- **Idarubicin** (7mg/m²/day) ______ mg IV days 1-4
  - Idarubicin ______ mg IV day 1 ______
  - Idarubicin ______ mg IV day 2 ______
  - Idarubicin ______ mg IV day 3 ______
  - Idarubicin ______ mg IV day 4 ______

- **All-trans-retinoic acid** (45mg/m²/day) ______ mg PO rounded to the nearest 10mg in twice daily doses (_______mg PO twice daily) days 1-15
  - Day 1-15= _______. (If patient < 20 years old, dose reduce to 25mg/m²/day)

*Risk categories: Based on patient leukocyte and platelet count at diagnosis
  Low risk= WBC<10,000 and platelet count>40,000
  Intermediate risk= WBC<10,000 and platelet count<40,000
  High risk= WBC≥10,000

Signed: _______________________________ Pager:_________
