Cancer Services – Prescribe treatment cycles



Digital Health Quick Reference Guide

This Quick Reference Guide will explain how to:

• Prescribe the treatment cycle for EMR treatment regimen

Prescribe a cycle

- 1. Navigate to Orders and Referrals under the Table of Contents menu within the appropriate EMR encounter.
- 2. Click on the regimen under listed under "View.
- 3. Click **Start** for Cycle X (to commence cycle X).

Tingfive, Fai MR 🗵						← List → 🛅 Recer	it 👻 MRN	Q, •
Tingfive, Fai MR Allergies: No Known Allergies Alerts: Not Recorded	Resus Status:		Sex:Male DOB:31/12/1940 Age: 82 Years Weight: 80kg 20/06/2023 15:06	Clinical Unit: Oncol LoczzS1ECDU; zzR Inpatient [30/11/20	ogy m 01; zzWaiting Room 22 10:11:00 to <no -="" date="" discharge="">]</no>	UR:2000091 Clinician:Greenberg, Sally - SM Medicare:3710 31195 1-1	0	
Menu ¥	< > 👻 🏫 Orders and Referrals					💱 Full screen	🖶 Print 🥠	
Patient Information	+ Add 🖓 Document Medication by Hx Re-	conciliation *				Reconciliation St	atus	-
Medical Officer View						Heds History	Admission	Discharge
Outpatient View	Orders Medication List Document In Plan I	Manage Infusions						
Outpatient Paediatrics View	K							
Orders and Referra	als 🕂 Add	Show additional details	Psponses					
MAR		PI	ancer is 8 cycles. Then, prescribe ONC CRC - de Gram	iont until disease progression or u	nacceptable toxicity.			
MAR Summary	View		voer is 8 oveler		,			
Medication List	Orders for Signature							
Documentation + Add		les) (Started)	gastroesophageal cancer and advanced biliary and ga	illbladder cancer is continuous un	Il disease progression or toxicity (usually 12 c)	ycles).	Gent Date: 20/06	(2022-12-20
Continuous Notes		les) (Started)	y bay blit (cbb)		Done		start bate: 50/00/	Beneat
Notes + Add	Medication History						*Est. Start Date: *	
Interactive View and Fluid Balance	-Medication History Snapshot							Skip
Activities and Interventions	Reconciliation History	- OMC		velo 1			*Est. Start Date: **	*/**/****
			F - FULFUNU - C	ycie i			*Est. Start Date: **	*/**/****
Observation Chart							*Est. Start Date: **	*/**/****
Allergies/Sensitivities + Add		C.4					"Est. Start Date: "	*/**/****
Dx, Problems/Alerts		36	art				"Est. Start Date: "	
Dx, Current Procedures							*Est. Start Date: *	** /** /****
Form Browser					•		Call Start Dates	Extend
Case Conference/Discharge Plann								
Care Plan Summary								
Growth Chart								
Histories								
Immunisation								
MultiMedia Manager 🕂 Add								
GP View								
My Health Record								
Pregnancy Summary Report								
Research	د >	T Details						
Referrals View	Diagnoses & Problems	Du Table - Orders For Conignati	**				Orders 9	Eor Cirposh re
Appointments	Neiaced Results	Under For Costyrate					- Ordere Pr	orogratule

You may encounter the following alert message when ordering the cycle in a PreAdmit or PreReg encounter:

"Order Services. You are about to place orders on a future encounter or an encounter with no registration date and time. Do you wish to continue?"

Order Ser	rvices	×
	You are about to place orders on a future encounter or an encount with no registration date and time. Do you wish to continue?	Er
	Yes No	

4. Select 'Yes' to proceed.





The "Add Plan" window opens:

- 1. Review the Cycle number.
- 2. Review the Visit Type.

Visit type	Phase Action			When to use
	Treatment	Pathology +	Scheduling	
	Regimen	Prescriptions		
This Visit	Order for	Order now	Do not order	Patients receiving treatment in the
	future visit			same encounter.
Future	Order for	Order now	Do not order	Patients receiving planned
Inpatient Visit	future visit			treatment outside of CDU (e.g.
				Sunshine Hospital ward 2E).
				Does not require CDU scheduling.
Future	Order for	Order now	Order now	Patients receiving treatment in
Outpatient Visit	future visit			CDU.
				Requires CDU scheduling

- Do not edit Estimated Start Date of Treatment Regimen fields.
- 4. Click OK.
- 5. Cycle [no.] PowerPlan opens to the "Treatment Regimen" phase.

Tingfive, Fai MR - Add Plar		— 🗆 X
ONCP - FOLFOX6		
Enter Cycle ast ordered: NCP - FOLFOXE Warning - Cycle 1 has been o	Cycle 1 dered on this patient in the last 180 days.	
Select Visit and Start Time		_
 This Visit 	Estimated Start Date of Treatment Regimen (Day 1, 3)	
O Future Inpatient Visit	O In Day(s)	
Future Outpatient Visit	○ In Week on ot edit	
	O In Month(s)	
	Est. start 30/06/2023	AEST
Confirm Phase Action		
Phase	Start Date/Time	Action
🗄 Treatment Regimen (Day	, 3) *Est. 30/06/2023 13:12 AEST	Order for future visit 💌
Pathology + Prescription	30/06/2023 13:12 AEST	Order now 💌
Scheduling	30/06/2023 13:12 AEST	Order now 🔻
ingfive, Fai MR - 2000091		OK Cancel



Order a cycle (continued)

"Treatment Regimen" phase

Tingfive, Fai	MR 🗵						← List → 🛅 Recent ▾ MRN Q
Tingfive, Fai Allergies: No Ki Alerts: Not Rec	MR nown Allergies orded	Resus Status:		Sex:Male DOB:31/12/1940 Age: 82 Years Weight: 80kg 20/06/2023 15:06	Clinical Unit: (Loc:zzS1ECDU	Dicology J; zzRm 01; zzWaiting Room (11/2022 10:11:00 to <no -="" date)<="" discharge="" th=""><th>UR:2000091 Clinician:Greenberg, Sally - SMO •1 Medicare:3710-31195-1-1</th></no>	UR:2000091 Clinician:Greenberg, Sally - SMO •1 Medicare:3710-31195-1-1
Menu	Ŧ	< > <	als				50 Full screen 🔲 Print 🗘 59 minutes ag
 Patient Information 			La area	-			Reconciliation Status
Medical Officer V		Add J Document Medication by Hx	Reconciliation	*			4 Meds History 4 Admission 4 Discharge
Outpatient View		Orders Medication List Document In P	lan Manage Infi	usions			
Outpatient Paedi	atrics View			Add to Bharay A Chack Alacts			
Oncology/Haem	atology View	View	ONCP - F	OFFOX6 - Cycle 1. Treatment Regimen (Day 1. 3) (Future Pending) *Est. 30/06/2023 14:10	- 14 Days		
Results Review		Diagnoses & Problems			Day 1	Day 3	
Orders and Refer		Height/Lengt	<u>چ_ < </u>	Refer to eviQ treatment protocol	Future Pendii *Est. 30/06/2023 Actio	Image Future Pending 14:10 *Est. 02/07/2023 14:10 Image: Pending Pend	
MAR Summary		- Weight Measured		@Pre-Treatment Assessments	<u> </u>		
Medication Li:	Rel	ated Results (3)	N	Neutrophils (Absolute Count) (Blood) - Greater Than or Equal 1.5	-3 day	Planned	
Documentatic				🗟 White Cell Count (Blood) - Less Than or Equal 11	-3 day	Planned	
Continuous N	Height/Leng	th Measured		🌇 Platelet Count (Blood) - Greater Than or Equal 100	-3 day	Planned	
Notes	180 cm	30/06/2023 12:29		A Hacmoglobin Level (Blood) Greater Than or Equal 90 g/L	-3 day	Planned	
Interactive Vie	180 cm	20/06/2023 15:06	M	Creatinine Level (Serum/Plasma) - Less Than or Equal 90 micromol/L	-3 day	Planned	
Activities and	E Weight Mea	rurad		Astronomy (Serum/Plasma) - Less Than or Equal 35 0 units/1	-3 day	Planned	
			N N	Nursing - Bloods Reviewed	-3 day	Planned	
Observation C	80 kg	20/06/2023 15:06	N	Medical - Accept Out of Range Bloods	-3 day	Planned	
Observation C	ONC/HAEM	Dosing Weight		🔛 Nursing - Ready for Treatment	-1 day	Planned	
Allergies/Sens	80 kg	30/06/2023 12:29	M	A Nursing - Keady for Treatment	Planned		
Dx, Problems/	80 kg	20/06/2023 15:06		Pre-Medications Compared and a second seco			
Dx, Current Pr	oo kg	20/00/2023 13:00		1 cap(s). Oral, Capsule, chemo-Day of Tx	Planned		
Form Browser				🐣 dexamethasone -30 min			
Case Conference	/Discharge Plann			8 mg, Oral, Tablet, chemo-Day of Tx A Troatmost Dogimen	Planned		
Care Plan Summi	ary		R 6	ti oxaliplatin IV infusion xx mg/m2 in Glucose 5% 0 min			
Growth Chart				85 mg/m2, IV Infusion, chemo-Day of Tx, Infuse over 2 hr(s)			
Histories				CYTOTOXIC: Special handling and disposal required.	Planned		
Immunisation				50 mg. IV Injection, Ampoule, chemo-Day of Tx	1		
MultiMedia Man	ager 🕂 Add			Administer over 1 to 2 minutes.	Planned		
GP View			🗹 🖌	fluorouracil IV infusion xx mg/m2 in Sodium Chloride 0.9% +125 min 400 mg/m2 IV Infusion champ. Day of Tx Infusion aver 10 min(c)			
My Health Record	d			CYTOTOXIC: Special handling and disposal required.	Planned		
Pregnancy Summ	nary Report		🗹 🔓	fluorouracil IV infusion xx mg/m2 in Sodium Chloride 0.9% INFUSOR +135 min			
Research			T Data				
Referrale View			L'etai	10			
Annainter ant			Dx Tal	le Orders For Cosignature			Orders For Signature
Appointments		1					

1. Click on the **Evidence** link icon the protocol on eviQ.

2. Under Pre-Treatment Assessments, review recent results.

The "- (number) day" indicates how many days the system looks back in time for results:

- a. If a matching result is found on EMR, and within the parameter listed, a green tick appears
- b. If a matching result is found on EMR, and outside the parameter listed, a red cross appears
- c. If no matching result is found on EMR, no indicator will appear
- 3. Under **Related Results** on the left-hand side panel, review relevant results, including the **ONC/HAEM Dosing** Weight.
- 4. Review the anti-cancer therapy orders under the following headings:





+	Add 🦨 Document N	Medication by Hx Rec	oncili	iatio	× nc			
Ord	ers Medication List	Document in Plan	/Janac	ae Ir	afusions			
	View	ب ا	P	0) 🕂 Add to Phase 🔻 🛕 Check Alerts 🛄 Comments			
	Diagnoses &	Problems	ON	CP -	FOLFOX6 - Cycle 1, Treatment Regimen (Day 1, 3) (Future Pending) *Est. 30/00	5/2023 14:1	0 - 14 Days	
	Related Re	sults (3)					Day 1	Day 3
	Height/Length Meas	ured		7	Component		Future Pending	Future Pending
	180 cm	30/06/2023 12:29					*Est. 30/06/2023 14:10	*Est. 02/07/2023 14:10
	180 cm	20/06/2023 15:06					Actions 🗸	Actions 🗸
	Weight Measured		V		retunitant-palonosetron (netunitant-palonosetron 300 mg-0.5 mg oral can	-30 min		
	80 kg	20/06/2023 15:06			1 cap(s), Oral, CPre-Medications	50	Planned	
6	ONC/HAEM Dosing	Weight			dexamethasone	-30 min		
	80 kg	30/06/2023 12:29					Planned	
	80 kg	20/06/2023 15:06				0		
				2	1 oxaliplatin IV infusion 🗴 mg/m2 in Glucose 5%	0 min		
					85 mg/m2, IV Infusion, chemo-Day of Tx, Infuse over 2 hr(s)			
			-		CYTOTOXIC: Special handling and disposal required.	120 12	Planned	
					Calcium folinate (calcium folinate 50 mg/5 mL injectable solution)	+ 120 min		
					Administer over 1 to 2 minutes		Planned	
			ম	•	Ti fluorouracil IV infusion xx mg/m2 in Sodium Chloride 0.9%	+125 min	Thurmed	
					400 mg/m2, IV Infusion, chemo-Day of Tx, Infuse over 10 min(s)			
					CYTOTOXIC: Special handling and disposal required.		Planned	
				0	ti fluorouracil IV infusion xx mg/m2 in Sodium Chloride 0.9% INFUSOR	+135 min		
					2,400 mg/m2Treatment ^y Reniment ^(s)			
					CYTOTOXIC: Special Manufuling and Bispussive Siled.		Plan. sd	
					Glucose 5% intravenous infusion solution (glucose 5% for IV catheter flush)	+ 120 min		
			ET.		100 mL, IV Injection, every 5 minutes, PRN, for other see indication, Indication: Fl	sh line b	Planned	
					50 - 100 mL. IV Injection, Bag, every 5 minutes, PRN, for other see indication, Indi	ation: Elu	Planned	Planned
					fluorouracil pump disconnect	0 min	Flatined	Fightineu
					1 pump disconnect, ONCE only			
					Disconnect infusion once complete.		Adn	ninistration
					Prescribe lipegfilgrastim if indicated by Consultant ONLY	0	time	in relation
					🕑 lipegfilgrastim	+10 min	ume	melation
					6 mg, Subcutaneous, Syringe, chemo-ONCE		to	the Zero
						dministra		
					Zero Hour anchor	Unr	Ho	ur anchor
				n	9			

a. Pre-Medications

b. Treatment Regimen

- i. For orders that require dosage calculations, the orders will have a dose calculator icon adjacent to them.
- ii. Double-click on the orders to open the dosage calculator.
 - 1. Review the default target dose
 - 2. Check if any dose modifications are required.
 - 3. Review the default Rounding rule.
 - 4. Review Height. If blank, manually enter a value
 - 5. Review Actual weight
 - 6. Manually set the weight to match the "ONC/HAEM Dosing Weight"
 - 7. Review the serum creatinine level. Manually enter the value if necessary
 - 8. Manually set the CrCl algorithm to "Cockroit-Gault (Actual Weight)"
 - 9. Click Apply Dose
- 5. Repeat the same Dose Calculation process for other medications as required.
- 6. For orders that do not require dose calculations, you can right-click on each of these drugs, click **Modify** to make adjustments if required.





P Dosage Calculator						
oxaliplatin (cher	no additive)					
Dose Values					Order Comments	
1) Target dose:	85	mg/m2	\sim		C Special handling and disposal required	-
2) Calculated dose:	170	mg			s, opera nanaling ana asposa requirea.	
3) Dose Adjustment:	170	mg	100 🖨 %			
4) Final dose:	170	mg	85	mg/m2		
				_		~
5) Standard dose:		mg		mg/m2		
6) Rounding rule:	Nearest 5		~			
7) Adjust Reason:			~			
8) Route:	IV Infusion					
Hoight 10		c,		2010012022	10:00 100:00 cm Haisbyll cm str Manageria	1
		J	Juice.			
Actual weight: 80	i) kg		arce	Adjust to	o match the	
Adjusted weight: 80) kg	Ad	d <mark>justn</mark> ent: ONC	HAEM	Dosing Weight	
		AI	gorith <mark>m:</mark>		~	
						1
Serum Treatinine: Se	et CrCI algorit	hm to		Manually ent	tered v	
Crockro	oft-Gault (Act	ual Weight)	eight Used for CrCl:	Actual weigh	nt (Actual Weight)	80 ka
Body surface area: 2	m2	AI	gorithm:	Dubois		
						,
Formulae Chandrad Dar	Deference				Analy Chandrad Davas Analy Davas	
Formulae Standard Dos	se neielence				whith organization prose which pose it	ancei

Important – Opening the Dosage Calculator

Single-click on the Dose Calculator will also open the dosage calculator. However, single-clicking on medications such as Rituximab will lead to loss of the default settings. These apply to medications that have the rates in mg/hr. Therefore, it is not recommended to single click on the icon for consistency of the workflow.

If a user single-clicked on one of these medication's calculator icon, following the steps below to retrieve the default values:

- 1. Click Cancel to exit the dosage calculator window
- 2. Right click on the rituximab order
- 3. Click Reset





Handy Tip - Supportive Care Medications for Inpatient administration

While completing the Dosage Calculator window, you are not able to navigate outside of the window to review the documented ONC/HAEM Dosing Weight.

To address this limitation, the regimens have been built so that ONC/HAEM Dosing Weight, along with several pertinent labs, are shown to the left of the window. Take advantage of this feature.

		· · · · · · · · · · · · · · · · · · ·				
	2] Calculated doce:	mg			CVT0100C Enclides for and door	durated
View	3) Dose Adjustment	ng	100 🜩 🌫		criteres, specarlanding and algor	-
	4) Final dose:	ng		AUC (Caboplain)		
Related Res						
180 cm	5] Standard dose:	ng		AUC (Caboplain)		
180 cm	6) Rounding rule:	Nearest ten	~	~		
180 cm	7) Adjust Reason:		~		-	-
Weight Measured	8] Poule:	IV Infusion		~		0.16
83 kg	Reference Data					
80 kg						
ONC/HAEM Dosing Weight	Date of hith:	16/12/1002	(10 Vers)			
85 kg	Car o ben	13/12/1292	c] (so read)			
85 kg	Sex	Male ~				
100 100	Marine .	100	E	04 18 0 100 00 00		
	negri	104 08	SOMOR.	0171272022.05	2.36 100.00 cm Height/Length Measured	
	Actual weight	83 ka	Source	09/01/2023 11	150 E1000 kn Weide Meanwed	
	- and mage		Adutment	Actual Ino adju	atment)	
			Algoithm:			
	Serum creatinine:	unol	 Source: 	Manually enter	ed 🗸	
	C/Cl (est.):		Algorithm	Cockroft-Gault	~	Missing data
			Weight Used	for C/O		
	Body surface area:	2.03 #2	Algorithm:	Dubois	v	

Handy Tip – Entering PBS Approval number

If the order requires a PBS Approval number, this is best entered at the time of ordering/dose calculation.

Details 🗮 Ingredient Details 🔃 Order Comments				
+SL EX		Remaining /	dministrations: 1 Stop: 05/04/2	023 17:00:00 AE
Strength dose: See Ingredients Tab	Strength dose units	See Ingredients Tab		
Freetext dose: See Ingredients Tab	*Route of administration:	IV Infusion	-	
Drug Form: 🗸	*Frequency:	chemo-Day of Tx	w	
PRN: C Yes @ No	PRN reason:		w	
Aax dose per 24 hours:	Durations			
Duration unit	Indication			
Special Instructions:	Approval Number:	l		
	Parit Date Date / Tame:	05/04/2023 17/00 AEST	1×1	
Priority: Routine	Stop Date/Time:	05/04/2023	alst 🔘	
Dura harris Mandalan Oran	Baticat's Our Made	C Mr. C Mr.		

If the Approval Number is missing when attempting to sign of the orders, an alert window will appear:

he order for pembrolizuma	b (additive) requires a PBS Approval Number.	^
or items with a PBS STREAM pproval Number field.	/LINED authority, enter the PBS authority code in th	he
or items requiring a PBS AU nsure that there is a valid P	ITHORITY, enter 'Authority' in the Approval Numbe BS Authority prescription.	r field and
the order does not meet Pl ndividual Patient Usage (IPL	BS or WH Drug Formulary requirements, complete a I) Application and contact Pharmacy.	an
treatment is being adminis lumber field.	tered on an inpatient ward, enter NON-PBS in the A	Approval
lert Action:) Cancel ordering pembrolizuma	b (additive)	
Enter Approval No. for pembro	izumab (additive)	
IS site		OK





Yes

No





"Pathology + Prescriptions" phase

Tingfive, Fai MR 🗵				← List → 😁 Recent マ MRN Q
Tingfive, Fai MR Allergies: No Known Allergies Alerts: Not Recorded	Resus Status:	Sex:Male DOB:31/12/1940 Age: 82 Years Weight: 80kg 20/06/2023 15:06	Clinical Unit: Oncology Loczz51ECDU; zzRm 01; zzWaiting Room inpatient (30/11/2022 10:11:00 to <no -="" date="" discharge="">]</no>	UR:2000091 Clinician:Greenberg, Sally - SMO Medicare:3710 31195 1-1
Menu ¥	< The orders and Referrals			💱 Full screen 📄 Print 🥠 2 hours 3 minutes :
Patient Information	Add Document Medication by Hr Reconciliation*			Reconciliation Status
Medical Officer View				Meds History 4 Admission 4 Discharg
Outpatient View	Orders Medication List Document In Plan Manage Infusi	ons		
	1	% 🛇 🕂 Add to Phase- 🔥 Check Alerts 🏭 Comments Start: 30/06/2023 1	14:10 Duration: 14 Days	
	View	V Component Status	Dose Details	
👘 Orders for Signature		ONCP - FOLFOX6 - Cycle 1, Pathology + Prescriptions (Initiated Pending)		
ONC - FOLFOX6 (8)	rycles) (Undate Pending)	Pathology Orders for Next Cycle		0
	cycles) (opdate i chang)	Full Blood Examination (FBE)	Collect Now, Spec Type: Blood, URGENT - Pre-Chemothera	oy Bloods, Clin Call Back: 59154
ONC/HAEM Refer	ral to Chemotherapy Day Unit (CDU) (Co	Urea, Electrolytes and Creatinine (UEC)	Collect Now, Spec Type: Blood, URGENT - Pre-Chemothera	py Bloods, Clin Call Back: 59154
ONCP - FOLFOX6	- Cvcle 1	Calcium Managerium & Descripter (CMD) Levels Blood	Collect Now, Spec Type: Blood, URGENT - Pre-Chemothera	by bloods, Clin Call Back: 39134
		tose Level Blood Random (RBG)	Collect Now, Spec Type Blood, URGENT - Pre-Chemothera	ov Bloods, Clin Call Back: 59154
7	1.1. (1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	scriptions		
Pathology + Pre	escriptions (Initiated Per	upitant-palonosetron (netupitant-palonosetron 300 0.5 mg oral capsule)	1 cap(s), Oral, Capsule, ONCE only, For administration at ch	emotherapy, Qty: 1 cap(s), Refili(s) 5, PBS
		amethasone (dexamethasone 4 mg oral tablet)	1 tab(s), Oral, Tablet, BD (morning and midday), for 2 days a 5, Non-PBS - "PRIVATE"	fter chemotherapy. Take with or after food., Qty: 4 tab(s), Refill(s)
Interactive view and Fluid Balance	Orders	 docusate-senna (Coloxyl with Senna oral tablet) 	2 tab(s), Oral, Tablet, BD, PRN constipation, Qty: 30 tab(s)	
Activities and Interventions	I Inactive	 metoclopramide (metoclopramide 10 mg oral tablet) 	1 tab(s), Oral, Tablet, TDS, PRN nausea / vomiting, Qty: 25 t	ib(s), PBS
	Medication History	loperamide (loperamide 2 mg oral capsule)	See instructions, Oral, Capsule, See Instructions, Take 2 caps stool. Otv: 20 cap(s). Non-PBS - "PRIVATE"	ules at the onset of diarrhoea and then 1 capsule after each loose
Observation Chart	-Medication History Snapshot			
Allergies/Sensitivities + Add	Enconcinetion history			
Dx, Problems/Alerts				
Dx, Current Procedures				
Form Browser				
Case Conference/Discharge Plann				
Care Plan Summary				
Growth Chart				
Histories				
Immunisation				
MultiMedia Manager + Add				
GP View				
My Health Record				
Pregnancy Summary Report				
Research		The Details		
Referrals View	Diagnoses & Problems			
Annalationarth	Related Results (3)	Dx Table Orders For Coxignature		Orders For Signature
Appointments				

1. Click View

2. Click on "Pathology + Prescriptions" phase, located under View

3. Review orders under "Pathology Orders For Next Cycle"

- Note some pathology orders have been pre-selected by default. All the order details have also been precompleted
- · You can tick additional pathology orders in this window if required

4. Review orders under "Prescriptions"

• You can tick the prescriptions that are deemed required for the patient

Important – Supportive Care Medications for Inpatient administration For patients receiving treatment as an INPATIENT, the Supportive Care medications are not included in the regimen. Please order these medications SEPARATELY.

"Scheduling" phase

- You do not need to interact with this phase during routine ordering of the treatment cycle.
- The orders within the Scheduling phase communicate with the CDU staff for scheduling purposes.
- A limited number of scenarios requiring the ordering clinician to de-select the scheduling order(s) will be covered in a separate QRG on Treatment Modifications.





Review orders

- 1. Click Orders For Signature
- 2. Complete the Clinical History window that is mandatory for the pathology orders
- 3. Review all the orders again
- 4. Click Sign

?	₽Ŗ	70	Order Name	Status	Start	Details
		0	ONCP - FOLFOX6 - Cy	Future Pe		placing 10 order(s)
		0	ONCP - FOLFOX6 - Cy	Initiated		placing 5 order(s)
		0	ONCP - FOLFOX6 - Cy	Planned P		placing 0 order(s)
4 22S1	1ECD)U; z	zRm 01; zzWaiting Ro	om Fin#:IPE	75373819 Admit: 3	0/11/2022 10:11
⊿ Path	olog	1Y				
			Urea, Electrolytes and Creatinine (UEC)	Order	30/06/2023 15:34	Collect Now, 30/06/2023 15:34 AEST, Spec Type: Blood, URGENT - Pre-Chemotherapy Bloods, Clin Call Back: 59154
0	۱ 🕀	F (Full Blood Examination (FBE)	Order	30/06/2023 15:34	Collect Now, 30/06/2023 15:34 AEST, Spec Type: Blood, URGENT - Pre-Chemotherapy Bloods, Clin Call Back: 59154
1	()	E L	Liver Function Tests (LFTs)	Order	30/06/2023 15:34	Collect Now, 30/06/2023 15:34 AEST, Spec Type: Blood, URGENT - Pre-Chemotherapy Bloods, Clin Call Back: 59154
	()		Calcium, Magnesium & Phosphate (CMP) L	Order	30/06/2023 15:34	Collect Now, 30/06/2023 15:34 AEST, Spec Type: Blood, URGENT - Pre-Chemotherapy Bloods, Clin Call Back: 59154
	()	F C	Glucose Level Blood Random (RBG)	Order	30/06/2023 15:34	Collect Now, 30/06/2023 15:34 AEST, Spec Type: Blood, URGENT - Pre-Chemotherapy Bloods, Clin Call Back: 59154
⊿ Futu	ire					
⊿ Med	licati	ions				
•	1	a 🖬	oxaliplatin (chemo additive) + Glucose 5	Order	30/06/2023 16:05	170 mg, IV Infusion, chemo-Day of Tx, Infuse over 2 hr(s), First dose 30/06/2023 16:05 AEST, Stop date 30/06/2023 16:05 AEST, Day 1 CYTOTOXIC: Special handling and disposal required. Target Dose: oxaliplatin (chemo additive) 85 mg/m2 (Actual Dose: 85 mg/m2) 30/06/2023 15:34
•	1	🗈 d	dexamethasone	Order	30/06/2023 15:35	8 mg, Oral, Tablet, chemo-Day of Tx, First dose 30/06/2023 15:35 AEST, Stop date 30/06/2023 15:35 AEST, Day 1
•	1	• n	netupitant-palonosetro n (netupitant-palonos	Order	30/06/2023 15:35	1 cap(s), Oral, Capsule, chemo-Day of Tx, First dose 30/06/2023 15:35 AEST, Stop date 30/06/2023 15:35 AEST, Order for future visit, Day 1
•	1	fi a	fluorouracil (chemo additive) + Sodium C	Order	30/06/2023 18:10	800 mg, IV Infusion, chemo-Day of Tx, Infuse over 10 min(s), First dose 30/06/2023 18:10 AEST, Stop date 30/06/2023 18:10 AEST, Day 1 CYTOTOXIC: Special handling and disposal required. Target Dose: fluorouracil (chemo additive) 400 mg/m2 (Actual Dose: 400 mg/m2) 30/06/2023 1
•		• c	calcium folinate (calcium folinate 50	Order	30/06/2023 18:05	50 mg, IV Injection, Ampoule, chemo-Day of Tx, First dose 30/06/2023 18:05 AEST, Stop date 30/06/2023 18:05 AEST, Day 1 Administer over 1 to 2 minutes.
•	1	f f	fluorouracil (infusor chemo additive) + So	Order	30/06/2023 18:20	4,800 mg. IV Infusion, chemo-Day of Tx, Infuse over 46 hr(s), First dose 30/06/2023 18:20 AEST, Stop date 30/06/2023 18:20 AEST, Day 1 CYTOTOXIC: Special handling and disposal required. Target Dose: fluorouracil (infusor chemo additive) 2400 mg/m2 (Actual Dose: 2400 mg/m2) 30/
•	ļ	i 🕄	Glucose 5% intravenous infusion s	Order	30/06/2023 18:04	100 mL, IV Injection, every 5 minutes, PRN, for other: see indication, Indication: Flush line before and after administration of oxaliplatin as per eviQ guidelines, First dose 30/06/2023 18:04 AEST, Stop date 01/07/2023 03:34 AEST, Order for future visit, Day 1
•	1	s 🗈	Sodium Chloride 0.9% intravenous solution (Order	30/06/2023 16:04	50 - 100 mL, IV Injection, Bag. every 5 minutes, PRN, for other: see indication, Indication: Flush line between and after each medication administration as per eviQ guidelines., First dose 30/06/2023 16:04 AEST, Stop date 03/07/2023 02:10 AEST, Order for future visit, Day 1, 3
•	1	fi d	fluorouracil pump disconnect	Order	02/07/2023 15:00	1 pump disconnect, ONCE only, First dose 02/07/2023 15:00 AEST, Stop date 02/07/2023 15:00 AEST, Day 3 Disconnect infusion once complete.
•		💽 Z	Zero Hour	Order	30/06/2023 16:05	N/A
▲ Deta	ils					
0 Missin	g Red	quired	d Details Dx Table	Orders	For Cosignature	Sign
						M2031 P2MO1 30 Jun. 2023 15:35 J

Refresh and Review

- 1. Click Refresh
- 2. Click the top level chemotherapy regimen. This window shows that Cycle [no.] is "In Process"
- 3. Click on the sublevel cheotherapy cycle. This window shows all the assessments, and orders placed in the cycle



Plans Document in Plan Oncology Suggested Plans (1) Orders Active Medication History Medication History Redication History Snapshot



1 cap(s), Oral, Capsule, chemo-Day of Tx, First dose 30/06/2023 15:35:00, Stop date 30/06/2023 15:35:00, Order for future visit, Day 1

8 mg, Oral, Tablet, chemo-Day of Tx, First dose 30/06/2023 15:35:00, Stop date 30/06/2023 15:35:00, Day 1

170 mg, IV infusion, chemo-Day of Tx, Infuse over 2 hr(s), First dose 30/06/2023 16:05:00, Stop date 30/0 CYTOTIOXC Special handing and disposal required. Target Dose coaliplatin (chemo additive) 85 mg/. Ty ang, IV injection, Ampoule, chemo-Day of Tx, First dose 30/06/2023 18:05:00, Stop date 33:00 MG mg, IV hingtican, chemo-Day of Tx, Infuse over 16 min(s), First dose 30/06/2023 18:10:00, Stop date 3. CYTOTIOXC Special handing and disposal required. Target Dose fluoroursoil (chemo additive) 40 mg/. 4,900 mg, IV infusion, chemo-Day of Tx, Infuse over 46 hr(s), First dose 30/06/2023 18:20:00, Stop date 3... CYTOTIOXC Special handing and disposal required. Target Dose fluoroursoil (infuso chemo-additive) 40 mg/.

CYTOTOXIC special handling and disposal required. Target Dose fluorourcal (influor chemo additive:, 10 mL, V) highcino, nevrg 3 minutes, PNN, for others se indication, Indication: Flush line before and after administration of oxaliplatin as per evQ guidelines, First dose 30/06/2023 18:04:00, Stop date 01/0... 50 - 100 mL, V) lingticino, Bag, every 3 minutes, PRN, for others see indication, Indication: Flush line between and after each medication administration as per evQ guidelines, First dose 30/06/2023 18:04:... 1 pump disconnect, ONCE only, First dose 02/07/2023 15:00:00, Stop date 02/07/2023 15:00:00, Day 3 Doconnect Induison one complete.

Orders For Signature

Edit View Patient Chart Links Notifications Options Current Add Help

👫 Welcome 🕼 Ambulatory Organiser 🖃 Message Centre 🎍 Patient List 🎆 Medical Worklist 📓 Task Manager 📊 MyExperience 😂 Multi-Patient Task List 🧯 Collection Runs 📓 Research Organiser 🗐 Scheduling Tracking Board 🐃 Autotext 🔚 Dynamic Worklist 🖗 Case Selection Perioperative Tracking

 Image: Second all Second
 Clinical Unit: Oncology
 UR:200091

 Loczz51ECDU; zzRm 01; zzWaiting Room
 Clinician.Greenberg, Sally - SMO

 Inpatient [30/11/2022 10:11:00 to <No - Discharge date>]
 Medicare.3710 31195 1-1
 > 👻 🔒 Orders and Refe + Add | @ Document Medication by Hx | Reconciliation* Reconciliation Status Meds History
Admission
Discharge Orders Medication List Document In Plan Manage Infusions View All View 8 Orders for Signature ONC - FOLFOX6 (8 cycles) (Started) ONC/HAEM Referral to Chemotherap
 ○ ORFset
 ▼
 ICcomponent
 \$\$tatus
 Dose...
 Oetai

 ⊿ ONCP - FOLFOX6 - Cycle 1, Treatment Regimen (Day 1, 3) (future) *Eta 500/2023 15:34 - 03/07/2023 02:10
 Last updated on 30/06/2023 15:35 /pt. Cemertest, Medical Officer P2 1

 Image: Second Seco apy Day Unit (CDU) (Co ONC/HAEM Referant to Chemotherapy Day Unit (CDU) (CC ONCP - FOLF0X6 - Cycle 1 Treatmeet Regimen (Day 1, 3) (future) Pathology + Prescriptions (initiated) Schedling (Planned) ONC Metatatic - vinORELBine (Open Ended) (Discontinu

 Image: Second Secon -3 day
 Day 1 Day 1

netupitant-palonosetron 300 Future

liplatin (chemo additive) + Glucose 5% infusion 500 Future

Future

Future

N/A

nic - rolrono (o cycles) (Starteu)

Show additional details

ppointment

Ocument Response Wiew Responses

Treatment for metastatic colorectal cancer is 8 cycles. Then, prescribe ONC CRC - de Gramont until disease progression or unacceptable toxicity.

Details

Diagnoses & Problems Related Results

🕨 🔲 0 min

Treatment for adjuvant colorectal cancer is 8 cycles.

Treatment for metastatic gastric and gastroesophageal cancer and advanced biliary and gallbladder cancer is continuous until disease progression or toxicity (usually 12 cycles).

🕨 🔲 0 hr 🔗 Zero Hour

Dx Table Orders For Cosignature

Wiedical - Accept Out of
 Wassing - Ready for Trea
 Pre-Medications
 netupitant-aslocation

netupitant-palonosetror mg-0.5 mg oral capsule)

 Imit injectable solution) The second Innusion 100 mL
 Innusion 100 mL
 Innusion 100 mL
 Chloride 0.9% infusion 115 mL
 Future Chloride 0.9% infruences infruences infruences in the interval of Glucose 5% Entruences infruences infruences

ONC/HAEM Referral to Chemotherapy Day Unit (CDU)	Done	Start Date: 30/06/2023 12:28
ONCP - FOLFOX6 - Cycle 1 ONCP - FOLFOX6 - Cycle 1	In Process	*Est. Start Date: 30/06/2023 15:34
		Repeat
ONCP - FOLFOXG - Cycle 2		*Esl. Start Date: 14/07/2023
Start Copy forward details from ONCP - FOLFOX6 - Cycle 1		Skip
ONCP - FOLFOX6 - Cycle 3		*Est. Start Date: 28/07/2023
ONCP - FOLFOX6 - Cycle 4		*Est. Start Date: 11/08/2023
ONCP - FOLFOX6 - Cycle 5		*Est. Start Date: 25/08/2023
ONCP - FOLFOX6 - Cycle 6		*Est. Start Date: 08/09/2023
ONCP - FOLFOX6 - Cycle 7		*Est. Start Date: 22/09/2023
ONCP - FOLFOX6 - Cycle 8		*Est. Start Date: 06/10/2023
		Extend