

Your Intravenous Etoposide, Methotrexate, Actinomycin-D, Cyclophosphamide and Vincristine (EMACO) Chemotherapy Schedule

For patients who have Gestational Trophoblastic Disease

Read this resource to learn:

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For questions about your chemotherapy appointment call: 416 946 2220,
Press 1. Or visit: www.chemotherapy.theprincessmargaret.ca

Your first day of treatment is: _____



About EMACO chemotherapy

What is EMACO chemotherapy?

Chemotherapy is a cancer treatment that uses medicine to kill cancer cells.

You will be getting 5 chemotherapy medicines called Etoposide, Methotrexate, Dactinomycin, Cyclophosphamide and Vincristine. This type of chemotherapy is also known as “EMACO” chemotherapy.

How long will my treatment last?

You will get EMACO chemotherapy on Day 1, Day 2, and Day 8. You will be admitted to the inpatient unit on 18B – Short Term Care Unit at Princess Margaret Cancer Centre to receive the treatment. Once the chemotherapy is completed on Day 2 you will go home. The following week on Day 8 you will receive the rest of the chemotherapy as an outpatient in the Systemic Therapy Unit on the 4th floor of Princess Margaret. Once it is completed you will go home.

Below is the schedule, your cycle of chemotherapy given every 2 weeks.

Week 1: Inpatient 18B – Short Term Care Unit

Day 1: Etoposide, Methotrexate and Dactinomycin

Day 2: Etoposide and Dactinomycin

Days 2 to 5: Filgrastim injection, the first injection in the hospital, the rest at home

Week 2

Day 8: Cyclophosphamide and Vincristine

Days 9 to 12: Filgrastim injection (at home)

Ask your oncologist (cancer doctor) how many cycles you will receive.

How will I get chemotherapy?

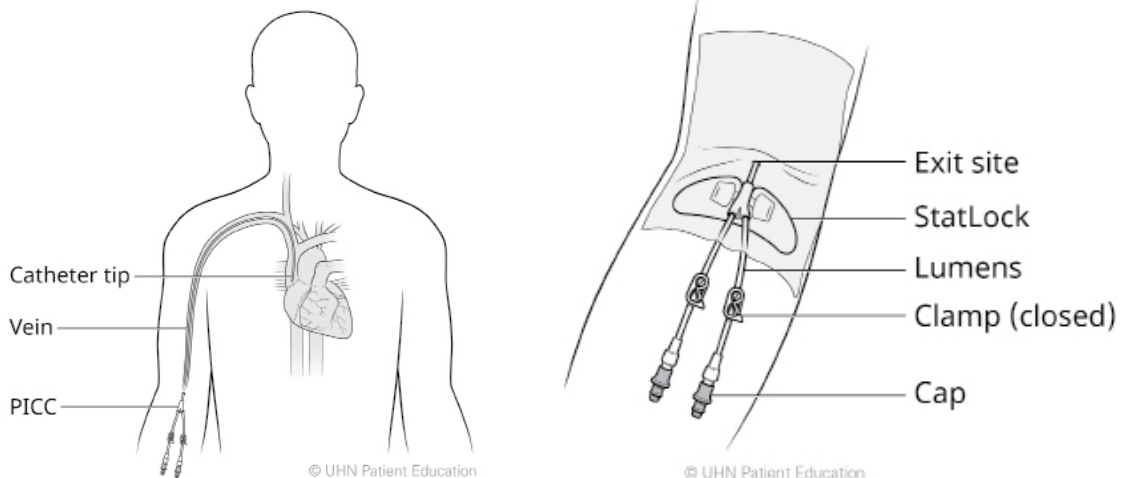
You will get your chemotherapy through a PICC line in your arm. A PICC catheter is a small, flexible tube placed into a vein in your upper arm. One end of the tube goes inside your body. The other end stays on the outside.

Why do I need a PICC?

Your chemotherapy must be given through a PICC line to protect your veins. Your PICC line can also be used for:

- collecting blood samples
- fluids
- medicines like antibiotics
- blood transfusion
- depending on the type of PICC you have, your PICC can also be used to inject a special dye during a CT scan or MRI test (special kind of x-ray)

PICC Line



How often will I see my oncologist during chemotherapy?

You will see your oncologist once before each treatment cycle. Check your appointment schedule for times and dates.

Why do I need so many blood tests?

Chemotherapy affects your whole body. Blood tests are used to:

- decide whether it is safe to give you treatment
- see if your medicines need to be adjusted or changed

The 4 most common blood tests are:

- Complete Blood Count (CBC). This test shows the number of red blood cells, white blood cells, and platelets.
- Creatinine. This test shows how well your kidneys are working.
- Liver function: This test shows how well your liver is working.
- HCG level: This test is the pregnancy hormone, 'human chorionic gonadotropin' that shows how much the level goes down with each chemotherapy treatment.

Your chemotherapy may be delayed if your blood counts are too low. Your oncologist (cancer doctor) will talk to you about this. Read pages 13 to 17.

Where to go for your appointments

Where do I go for my appointments?

All of your chemotherapy related appointments are at the Princess Margaret Cancer Centre.

For blood tests

Go to the Blood Collection Lab on the main floor at Princess Margaret.

For appointments with your oncologist

Go to the Gynecology Clinic on the 5th Floor of Princess Margaret. Your appointment schedule will also tell you where the clinic is.

To pick up medicine

The Princess Margaret Outpatient Pharmacy is located on the main floor. To use the Princess Margaret Outpatient Pharmacy you must pick up the prescription at least 2 days before your first treatment.

If you use a pharmacy near you, give them your prescription as early as possible to make sure they have cancer medicines in stock.

For your chemotherapy treatment

- During your week 1 overnight (inpatient) stay at Princess Margaret, go to 18B – Short Term Care Unit on the 18th floor. Remember to bring your toothbrush, other toiletries, and comfortable clothing for your stay. We will provide food and drinks.
- During week 2 as an outpatient, go to Systemic Therapy Unit on the 4th floor of Princess Margaret.

What should I bring to my chemotherapy appointment?

- Your health card (OHIP)
- Your appointment schedule (this is on a white sheet of paper)
- Private insurance information (if you have any)
- Money for parking and food
- Any medicine you need to take during the day
- Something to do. For example, bring a book, an electronic device with earphones, a laptop or tablet to keep you busy. You may be in the unit for a long time. There is free WiFi in the hospital. Speak with a member of the health care team at the Short Term Care Unit about visiting hours during your Week 1 inpatient stay.
- Meals and snacks for the day. Bring foods with mild smells. Strong smells can sometimes make other patients feel sick. The clinic provides free juice, cookies and Popsicles.
- Someone to drive you home. It is not safe to drive after the appointment. Some of the medicines will make you drowsy.
- One family member or friend can check on you during your treatment.

Managing side effects

What are some possible side effects?

Different kinds of chemotherapy cause different side effects. Your type of chemotherapy may cause these side effects:

- nausea (feeling of having to throw-up) vomiting (throwing-up)
- diarrhea (passing a lot of liquid poo) or constipation (trouble having poo)
- low white blood cells in your blood
- low platelets in your blood
- low red blood cell counts
- bladder problems
- mouth sores
- heartburn
- cancer-related fatigue (feeling of tiredness that will not go away with sleep)
- hair loss
- peripheral neuropathy (a numb or tingling feeling in your hands or feet)

Not everyone gets these side effects. Read the section below to learn about each kind. Talk to your oncologist or nurse if you have any questions. The phone numbers can be found on page 30.

Important: These are rare (not common) reactions

During your treatment your nurse will ask you to let them know if you start to experience any of these symptoms below:

- shortness of breath
- sudden back pain
- chest pain or pressure (heaviness) or tightness in your throat
- swelling in your face, lips, or tongue
- sudden headache with blurry vision or confusion

If you have these symptoms, you might be having an allergic reaction to the chemotherapy. Your nurse will stop the chemotherapy, call the doctor, and give you medicines to stop the allergic reaction.

After receiving chemotherapy, some patients may develop a rash (red itchy spots) anywhere on their body.

Call your Gynecology Resource nurse at 416 946 2220 extension 2 if:

- you are at home and develop a rash (red itchy spots) on your body

Call 911 if you have:

- swelling in your face, lips or tongue
- sudden headache with blurry vision or confusion

If this happens at night, on a weekend or on a holiday:

1. Call the Afterhours Carepath Cancer Nurse at 1 877 681 3057.

They are available:

- weekdays – 5:00 pm to 8:30 am
- weekends and holidays – available 24 hours

2. Or go to your nearest hospital Emergency Department and tell the staff there that you are getting chemotherapy

Nausea and vomiting

Nausea is the feeling that you want to throw-up. Vomiting is throwing up. Nausea and vomiting can happen before, during or after your treatment.

To manage nausea and vomiting:

- Take your anti-nausea medicines to help prevent and control nausea. Take your anti-nausea medicines before you feel nausea. Do not wait until you start to throw-up to take your medicine. It is easier to prevent nausea and vomiting than it is to stop it once it starts.
- Take ondansetron hydrochloride (Zofran), and dexamethasone (Decadron) as prescribed (told by your doctor). See your treatment schedule on page 25 or page 31, or the instructions on the medicine bottle for more details.
- If you still feel like throwing-up, take teva-olanzapine (Olanzapine) if prescribed. Follow your doctor's instructions on how to take it.
- If you have diabetes, it is important to tell your family doctor that you are taking dexamethasone (Decadron). Dexamethasone may cause your blood sugar to go up.

Other tips to help you manage nausea and vomiting:

- Eat small amounts of food during the day. For example, try to eat every 2 hours.
- Eat slowly.
- Avoid spicy or strong smelling foods.
- Make notes about how you are feeling and tell your doctor or nurse at your next visit.
- Keep track of when you feel sick or vomit. For example, what time of the day do you start to feel sick? Do certain foods make you feel sick or vomit? If the same things happen over and over, try to change the pattern.
- Try recipes that are made for people getting chemotherapy and other

treatments. You can find these recipes:

- in a book called “Goes Down Easy” available in the Patient and Family Library. You can borrow or buy a copy.
- on the ELLICSR kitchen website at www.ellicsrkitchen.ca

Call your Gynecology Resource nurse at 416 946 2220 ext. 2 if:

- your anti-nausea medicine is not working
- you cannot keep fluid down for more than 12 hours

Your doctor or nurse will need to help you manage this.

If this happens at night, on a weekend, or on a holiday:

1. Call the Afterhours Carepath Cancer Nurse at 1 877 681 3057. They are available:
 - weekdays – 5:00 pm to 8:30 am
 - weekends and holidays – available 24 hours
2. Or go to your nearest hospital Emergency Department and tell the staff there that you are getting chemotherapy and immunotherapy.

Diarrhea

Diarrhea is watery or loose stools (poo). Diarrhea can cause:

- you to become very tired or dehydrated (not enough water in your body)
- you to become bloated or have stomach cramps
- the skin on your bottom to get red and irritated

To manage diarrhea:

- Drink 6 cups or 1.5 litres of fluid every day, unless your doctor gives you different instructions. Fluid includes any liquid you drink that does not have caffeine or alcohol in it.
- Eat foods that are low in fibre and fats. For examples of food that are low in fibre and fat, read “Eating Hints for People with Diarrhea”. Get this pamphlet from the Patient and Family Library (main floor of Princess Margaret).
- Avoid caffeine, spices and milk products.
- Eat 5 or 6 smaller meals instead of 3 larger meals each day.
- Do not take Imodium®. It is important to talk to your health care team first to see if it is OK to take medicine that treats diarrhea.
- For irritated skin, have a sitz bath. Read the pamphlet “Having a Sitz Bath”. You can get this pamphlet from the Patient and Family Library (main floor of Princess Margaret).
- You can also ask your nurse to book an appointment for you and your family to see a dietitian. A dietitian can give you advice about your diet and nutrition.

Call your Gynecology Resource nurse at 416 946 2220 extension 2 if:

- you have diarrhea (watery or loose poo) every 2 hours

If this happens at night, on a weekend or on a holiday:

1. Call the Afterhours Carepath Cancer Nurse at 1 877 681 3057.
They are available
 - weekdays – 5:00 pm to 8:30 am
 - weekends and holidays – available 24 hours
2. Or go to your nearest hospital Emergency Department. Tell the staff there that you are getting chemotherapy treatment.

Constipation

Constipation means it is difficult to have a bowel movement (poo). You may

have less bowel movements (poo) than is normal for you. Or you may have poo that is dry and hard to get out. This happens when your bowels (the part of your body that moves poo out) slows down or stops working.

Your chemotherapy, pain medicines or your anti-nausea medicine ondansetron hydrochloride (Zofran) can cause constipation.

To manage constipation:

- If you do not have a bowel movement between Day 1 and the morning of Day 2, take senna (Senokot). Then, call your nurse. The phone number is listed on page 13.
- Drink 6 cups or 1.5 litres of fluid every day (unless restricted by your doctor). Fluid is any liquid that does not have alcohol in it. It also includes fluids in the food you eat such as juices in fruit.
- Stay active. For example, go for a walk.
- Your doctor will tell you if you should add fibre to your diet. Foods that have fibre are:
 - raw veggies (such as leafy greens)
 - fruits (such as berries, apple with skin, grapes, oranges)
 - whole grain products (such as breads, cereals)
 - dried fruits, beans and lentils
 - prune juice

Important:

- Do not use suppositories or enemas before asking your doctor.
- If you have an ileostomy or colostomy do NOT take senna (Senokot) unless your doctor has told you to.

Call your Gynecology Resource nurse at 416 946 2220 extension 2 if you notice these signs:

- no bowel movement (poo) for 2 days
- nausea (feeling like you will throw up)
- vomiting (throwing up)
- lower back pain
- a bloated or swollen stomach
- not passing gas

These may be a sign of blockage in your bowels (bowel obstruction). Your doctor or nurse will need to help you manage this.

If this happens at night, on a weekend, or on a holiday:

1. Call the Afterhours Carepath Cancer Nurse at 1 877 681 3057. They are available:
 - weekdays – 5:00 pm to 8:30 am
 - weekends and holidays – available 24 hours
2. Or go to your nearest hospital Emergency Department and tell the staff there that you are getting chemotherapy.

Low white blood cell count (WBC)

White blood cells help your body fight infection. When your white blood cell count is low, you are at risk of getting an infection.

Your white blood cell count will start to drop 7 to 14 days after you get your treatment.

To lower your risk of getting an infection:

- Wash your hands with soap and water often. You can also use hand

sanitizer.

- Try to avoid going to crowded places, for example, malls, public transit, and movie theatres.
- Keep your home and surfaces clean.
- Do not go near people who are sick.

What are the early signs of an infection?

If you have a fever, it may be a sign that you may have an infection. It is very important to get this treated right away.

Many people get hot flashes after gynecological cancer surgery. It may be hard to tell the difference between a fever and a hot flash. These steps help you make sure if you have a fever or if you have a hot flash.

To check if you have a fever:

- Take your temperature with a thermometer.
- Wait 1 hour.
- Take your temperature again.

If your temperature is over 38 °C (100.4 °F) both times, then you have a fever.

- Do not take any acetaminophen (Tylenol) as it may hide your fever.
- Do not take acetylsalicylic acid (Aspirin) or ibuprofen (Advil) because it can affect your blood unless your doctor approves.
- You may be able to take these medicines after you have been seen by a doctor.

Important: You will receive an injection called filgrastim to help keep your white blood cell count up to fight infection. This injection can cause some bone or joint pain. Your doctor may tell you to take acetaminophen (Tylenol). Please make sure you check your temperature first before taking acetaminophen (Tylenol) because it can hide a fever.

Call your Gynecology Resource nurse at 416 946 2220 extension 2

if you have:

- a fever over 38 °C (100.4 °F)
- chills and shaking
- are not able to keep fluids down for more than 12 hours

If this happens at night, on a weekend, or on a holiday:

1. Call the Afterhours Carepath Cancer Nurse at 1 877 681 3057. They are available:
 - weekdays – 5:00 pm to 8:30 am
 - weekends and holidays – available 24 hours
2. Or go to your nearest hospital Emergency Department and tell the staff there that you are getting chemotherapy and immunotherapy.

Low platelet count (PLT)

Platelets form clots to help you stop bleeding. For example, if you were to cut your finger, your blood would clot to protect the area. Low platelets put you at risk of bleeding.

To lower your risk of bleeding:

- Use a soft toothbrush.
- Use an electric razor when shaving.

Talk to your oncologist, nurse or pharmacist before taking:

- acetylsalicylic acid (Aspirin) or ibuprofen (Advil or Motrin)
- any new medicines (including herbal or traditional medicine)

Your health care provider needs to check to see if they are blood thinners. If you are on a blood thinner medication, continue to take it and let your health care team know.

Call your Gynecology Resource nurse at 416 946 2220 extension 2 if you have:

- blood in your vomit
- bleeding gums
- nosebleed
- blood in your urine (pink pee)
- blood in your stool (dark, sticky or jelly-like poo)

Important: Vaginal bleeding or spotting is a symptom of your disease (Gestational Trophoblastic Disease) that should improve with your chemotherapy. If vaginal bleeding or spotting gets worse, it is important to let your health care team know.

If this happens at night, on a weekend or on a holiday:

1. Call the Afterhours Carepath Cancer nurse at 1 877 681 3057. Ask for the nursing supervisor. They are available:
 - weekdays – 5:00 pm to 8:30 am
 - weekends and holidays – available 24 hours
2. Or go to your nearest hospital Emergency Department and tell the staff there that you are getting chemotherapy and immunotherapy.

Low red blood cells (RBC)

Red blood cells carry oxygen through your body. When your red blood cells are low, you may have anemia. Anemia may make you feel very tired.

To feel less tired:

- Save your energy. For example, pace yourself and take naps.
- Eat foods high in iron (a mineral that helps make red blood cells) like meat and red beets.

Call your Gynecology Resource nurse at 416 946 2220 extension 2 if you have:

- dizzy or light-headed
- shortness of breath
- your heart is pounding very fast

For chest pain call 911

Do not start taking iron pills unless your doctor tells you to.

If this happens at night, on a weekend, or on a holiday:

1. Call the Afterhours Carepath Cancer nurse at 1 877 681 3057. Ask for the nursing supervisor. They are available:
 - weekdays – 5:00 pm to 8:30 am
 - weekends and holidays – available 24 hours
2. Or go to your nearest hospital Emergency Department and tell the staff there that you are getting chemotherapy and immunotherapy.

Bladder problems

You may have bladder pain with this chemotherapy treatment. You may feel

- pain or burning when you pee and you may see some blood
- lower back pain and needing to pee right away
- change in how much urine comes out

To manage bladder problems:

- Drink lots of water or other liquids. Drink 6 cups or 1.5 litres of fluid every day (unless restricted by your doctor). Fluid is any liquid that does not have alcohol in it.

Call your Gynecology Resource nurse at 416 946 2220 extension 2 if you have:

- severe pain when you pee
- have a fever of 38 °C or 100.4 °F
- seeing a lot of blood when you pee
- you are not able to pee

If this happens at night, on a weekend or on a holiday:

1. Call the Afterhours Carepath Cancer nurse at 1 877 681 3057. They are available:
 - weekdays – 5:00 pm to 8:30 am
 - weekends and holidays – available 24 hours
2. Or go to your nearest hospital Emergency Department and tell the staff there that you are getting chemotherapy.

Mouth sores

Mouth sores can start 1 to 2 weeks after you begin treatment. You may see small ulcers (sores) in the lining of your mouth and throat. These sores are called mucositis. It can be painful and can make eating, drinking and swallowing difficult.

To manage sore mouth and throat:

- Use a mouth rinse in the morning, at night, before and after each meal, and as often as possible during the day.
- Your doctor may prescribe a special mouthwash called Mucositis Mouth Wash which you swish and swallow or swish and spit 5 minutes before each meal and at bedtime or as prescribed.
- Talk to your health care team about good pain control. Take your pain medication as prescribed by your doctor.
- Use a soft-bristle toothbrush.
- Use gentle toothpaste that will not irritate or cause a burning feeling in your mouth, like Sensodyne or fruit-flavoured toothpaste for children.
- Limit hot, spicy, rough, and acidic foods.

Baking soda and water recipe

1. Dissolve 1 level teaspoon of baking soda in 2 cups (500 ml) water.
2. Stir until the baking soda is dissolved.

Salt and water recipe

1. Dissolve 1 level teaspoon of salt in 2 cups (500 ml) of warm water.
2. Stir until the salt is dissolved

Baking soda, salt and water recipe

1. Dissolve ½ level teaspoon of baking soda and ½ level teaspoon of salt in 2 cups (500 ml) of water.
2. Stir until the baking soda and salt are dissolved.

Flat club soda

1. Open any brand of store-bought Club Soda.
2. Leave it open until the soda is “flat” or no longer fizzes (the bubbles are gone).

Call your Gynecology Resource nurse at 416 946 2220 extension 2

if you have:

- difficulty swallowing, or are unable to eat or drink for more than 48 hours
- temperature over 38 °C (or 100 °F)
- excessive bleeding of the mouth or gums that lasts for a few hours
- infected gums (fever, bleeding, swelling, bad odour, tender gums)

Or go to your nearest hospital Emergency Department. Tell the staff there that you are getting chemotherapy.

Heartburn

Heartburn is a pain or burning feeling in your chest or throat. Some people feel this when they are lying down, bending over, and may have a bitter taste in their mouth.

To manage heartburn:

- After each meal do not lie down, sit or stand or go for a walk
- Raise the head of your bed using extra pillows
- Do not eat acidic foods like grapefruit, oranges, lemon, tomatoes
- Avoid greasy, fatty, and spicy foods
- Limit caffeine like tea or coffee and avoid alcohol

Call your Gynecology Resource Nurse at 416 946 2220 extension 2 if you feel:

- your heartburn is not getting better and is affecting your sleep and appetite.
- you may need medication to help with heartburn.

Cancer-related fatigue

Cancer-related fatigue is not the same as normal tiredness. It is a kind of tiredness or lack of energy that does not go away with rest or sleep. You may still feel tired after sleep or rest. This is the most common side effect of your treatment.

To manage cancer-related fatigue:

- Spread out the work you need to do over the day.
- Plan rest breaks.
- Do hard tasks when you have the most energy.
- Do light exercise to stay active (such as walking).
- Do not skip meals. Drink 6 cups or 1.5 litres of fluid every day (unless your doctor gives you different instructions). Fluid includes any liquid you drink that does not have alcohol in it. It also includes fluids in the food you eat such as juices in fruit.
- Do most of your sleeping at night. If you need to nap, take your nap before 3:00 pm.

Call your Gynecology Resource nurse at 416 946 2220 extension 2 if you have:

- extreme or worst fatigue. Look at the fatigue scale below to help you know your level of fatigue. Extreme fatigue is any amount between 7 to 10 on the scale
- trouble getting out of bed because of fatigue
- trouble doing your normal tasks or work

Your oncologist or nurse will still need to help you manage this.

Fatigue scale: Choose the number that best describes how you feel today



Hair Loss

You may start losing your hair 2 to 3 weeks after you start chemotherapy.

Hair loss can happen anywhere on your body. This includes eyebrows, facial hair, and hair on your genitals.

Your hair will grow back. This often happens 2 to 3 weeks after your chemotherapy ends.

To cope with hair loss:

- Cut your hair shorter at the start of chemotherapy. Do not shave your head. You may end up with cuts and scratches. This makes it easier for germs to get into your body.
- Use a mild shampoo and sun protection. This will protect your scalp.
- Wear scarves or hats.
- Sleeping on a satin pillow sometimes helps your scalp (head) feel better.
- Attend the “Look Good Feel Better” class. This class is led by cosmeticians and wig specialists.
- Learn how to manage side effects of treatment that may change your appearance. Visit the Princess Margaret class calendar at www.theprincessmargaret.ca/en/calendar.
- Visit the Princess Margaret wig or scarf salon on the 3rd floor. Wigs and scarves may be covered by private insurance. Ask your oncologist to provide a prescription. Pick up the Wig Salon brochure at the Patient and Family Library (main floor lobby, Princess Margaret).

Peripheral neuropathy

Peripheral neuropathy is numbness and tingling in your fingers, toes or both. Some people may feel unsteady on their feet. They may also have trouble picking up items with their fingers.

Peripheral neuropathy can make it harder to notice hot surfaces (like stove tops), and you may be more likely to get burned.

To prevent burns:

- Check the temperature of anything you touch with your elbow.
- Check the water temperature before you shower, bathe, or wash your hands.

Call your Gynecology Resource Nurse at 416 946 2220 extension 2 if you have any of these signs:

- pain in your abdomen (belly) that does not stop

If this happens at night, on a weekend or on a holiday:

- Call Afterhours Carepath Cancer nurse at 1 877 681 3057. They are available:
 - weekdays – 5:00 pm to 8:30 am
 - weekends and holidays – available 24 hours
 - Or go to your nearest hospital Emergency Department and tell the staff there that you are getting chemotherapy.

About EMACO chemotherapy

With your chemotherapy treatment it is important to:

- Avoid getting pregnant. Please talk with your health care provider about using more than one type of birth control.
- Protect your skin from the sun by using sunscreen with UVA, UVB and SPF of 30. Cover your skin with long sleeves, long pants and wear a hat. You can get a bad sunburn because your skin is now more sensitive to the sun.
- Do not eat grapefruit, Seville oranges or starfruit. They can make side effects worse.
- See your dentist before you start treatment. Once you start chemotherapy you have a higher chance of infection with regular dental cleaning. If you have a dental problem during your treatment, you might see someone on our dental team.
- We encourage you to have the flu shot and COVID vaccines.

Your treatment schedule



Check your appointment schedules for exact times and locations.

Pick up the printed list with the exact times and dates for your appointments at the Gynecology Department.

Pick up your medicine from the pharmacy:

If you use the Princess Margaret Outpatient Pharmacy you must pick up the prescription below, at least 3 days before your 1st treatment appointment.

- Ondansetron hydrochloride (Zofran)
- Dexamethasone (Decadron)
- Teva-olanzapine (Olanzapine)
- Senna (Senokot)



Go to your doctor's appointments.

This week you will have an appointment with your oncologist.



Get a blood test.

Do this at least 1.5 hours before your oncologist appointment.

Week 1



Check your appointment schedules for exact times and locations.

Refer to this list for the exact times and dates for your appointments.



Take your nausea medicine.

If you still feel nauseous after taking ondansetron hydrochloride (Zofran) and dexamethasone (Decadron), take teva-olanzapine (Olanzapine) every 12 hours as needed.



Take your constipation medicine.

If you do not have a bowel movement (poo) between Day 1 and the morning of Day 2, take senna (Senokot). Then, see the instructions on page 13 to know who to call right away.



Go to your doctor's appointments.

This week you will have an appointment with your oncologist.



Get a blood test.

Do this at least 1.5 hours before your oncologist appointment.

Day 1 (1st day of chemotherapy)

- Go to 18B Short Term Care Unit at Princess Margaret Cancer Centre where you will be admitted for 2 days to receive your chemotherapy
- You can expect to get your IV chemotherapies, Etoposide, Methotrexate and Actinomycin D (Dactinomycin), through your PICC line.

Day 2

- You will get your IV chemotherapies Actinomycin-D (Dactinomycin) and Etoposide through your PICC line.
- The nurse will give you Leucovorin pills to help protect your body from the side effects of chemotherapy.
- The nurse will also give you filgrastim injection to keep your white blood cell count up to fight off infection. We will show you how to give yourself this injection at home.
- You will be given a prescription for:
 - teva-olanzapine (Olanzapine) pills for nausea
 - Leucovorin pills
 - filgrastim injections
- Get these medicines from the Princess Margaret pharmacy on the main floor once you are discharged from the hospital. When your chemotherapy treatment is done you can go home.

At home on Days 3 and Day 4

At home on Day 3

- Take your **Leucovorin pills and dexamethasone (Decadron) with breakfast.**
- Take your filgrastim injection at the time instructed by the nurse.
- Take dexamethasone (Decadron) **with dinner before 6:00 pm.** If you take dexamethasone (Decadron) later than this, you may find it hard to fall asleep.
- If you still feel nauseous, take teva-olanzapine (Olanzapine) every 12 hours as needed.

Day 4

- Take dexamethasone (Decadron) with breakfast.
- Take your filgrastim injection at the time instructed by the nurse.
- Take dexamethasone (Decadron) **with dinner before 6:00 pm.** If you take dexamethasone (Decadron) later than this, you may find it hard to fall asleep.
- If you still feel nauseous, take teva-olanzapine (Olanzapine) every 12 hours as needed

Day 5

- Take your filgrastim injection at the time as the day before. If you still feel nauseous, teva-olanzapine (Olanzapine) every 12 hours as needed.

Week 2



Check your appointment schedules for exact times and locations.

Refer to this list for the exact times and dates for your appointments.



Take your nausea medicine.

If you still feel nauseous, take teva-olanzapine (Olanzapine) every 12 hours as needed .



Go to your doctor's appointments.

This week you will have an appointment with your oncologist.



Get a blood test.

You will have a scheduled appointment time to get a blood test done 1.5 hours before your appointment to see your oncologist .



Pick up your medicine from the pharmacy.

If you use the Princess Margaret Outpatient Pharmacy you must pick up the prescription below, at least 2 days before your 1st treatment appointment.

- Ondansetron hydrochloride (Zofran)
- Dexamethasone (Decadron)
- Teva-olanzapine (Olanzapine)
- Senna (Senokot)
- Filgrastim injection - This must be picked up at Princess Margaret Pharmacy

Day 8

- Bring your ondansetron hydrochloride (Zofran) and dexamethasone (Decadron) with you to the appointment. The nurse will tell you when to take your medicine.
- Go to your chemotherapy appointment at Princess Margaret Cancer Centre on the 4th floor. The appointment will last for about 2 hours.
- You will get IV cyclophosphamide and vincristine chemotherapy through your PICC line.

Days 9, 10, 11 and 12

- Take your filgrastim injection at the time instructed by the nurse.
- If you still feel nauseous, teva-olanzapine (Olanzapine) every 12 hours as needed.

Who to contact if you have questions

Questions about appointment date and times

Gynecology Oncology Reception

Phone: 416 946 2220, Press 1.

Questions about treatment and side effects

Weekdays from 9:00 am to 4:00 pm, call Gynecology Oncology Resource Nurse

Phone: 416 946 2220, press 2 and leave a message

After hours, weekends and holidays

Afterhours Carepath Cancer Nurse

Phone: 1 877 681 3057

Weekdays: 5:00 pm to 8:30 am

Weekends and holidays available 24 hours

Questions about medicine

Pharmacy Triage Line

Phone: 416 946 4501 extension 3345

A pharmacist will return your call within 72 hours

How to pick up your medicine prescriptions

(Monday to Friday 9:00 am to 5:30 pm)

Princess Margaret Outpatient Pharmacy

Phone: 416 946 6593

Week 1 chemotherapy schedule

Start date (Day 1): _____

Note: If you have an ileostomy or colostomy, do NOT take senna (Senokot) unless your doctor has told you to.

	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
During the day	Go to chemotherapy appointment on 18B at Princess Margaret Cancer Centre where you will be admitted for 2 days	When your treatment is done you will go to Princess Margaret Pharmacy on the main floor to pick up your medication that you will need to take at home	Take dexamethasone (Decadron) with breakfast Take your Leucovorin pills and filgrastim injection as instructed by the nurse	Take dexamethasone (Decadron) with breakfast Take your filgrastim injection at the same time as the day before	Take your filgrastim injection at the same time as the day before		
In the evening			Take dexamethasone (Decadron) with dinner before 6pm	Take dexamethasone (Decadron) with dinner before 6pm			



Check your appointment schedules for exact times and locations: Refer to this list for the exact times and dates for your appointments.



Take your nausea medicine: If you feel nauseous after taking ondansetron hydrochloride (Zofran), and dexamethasone (Decadron), take teva-olanzapine (Olanzapine) every 12 hours as needed.



Take your constipation medicine: If you do not have a bowel movement between Day 1 and the morning of Day 2, take Senokot (senna). Then, see the instructions on page 13 to know who to call right away.



Go to your doctor's appointments: This week you will have an appointment with your oncologist.



Get a blood test: If you have an oncologist appointment, get a blood test done 1.5 hours before your appointment.

Week 2 chemotherapy schedule

Start date (Day 8): _____

Note: If you have an ileostomy or colostomy, do NOT take senna (Senokot) unless your doctor has told you to.

	Day 8	Day 9	Day 10	Day 11	Day 12	Day 13	Day 14
During the day	Go to chemotherapy appointment on 4th floor (6 hours) Bring ondansetron hydrochloride (Zofran) and dexamethasone (Decadron) with you to your appointment. The nurse will tell you when to take it	Take your filgrastim injection as instructed by the nurse	Take your filgrastim injection at the same time as the day before	Take your filgrastim injection at the same time as the day before	Take your filgrastim injection at the same time as the day before		
In the evening							



Check your appointment schedules for exact times and locations: Refer to this list for the exact times and dates for your appointments.



Take your nausea medicine: If still feel nauseous, take teva-olanzapine (Olanzapine) every 12 hours as needed.



Go to your doctor's appointments: This week you will have an appointment with your oncologist.



Get a blood test: If you have an oncologist appointment, get a blood test done 1.5 hours before your appointment.



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