

Patient guide to R-CODOX-M and R-IVAC

Day 1	<p>Rituximab</p> <p>Doxorubicin</p> <p>Cyclophosphamide</p> <p>Vincristine</p>	<p>Given as an infusion. The first dose is started slowly and can take a few hours. If no reactions subsequent infusion given over 60 mins.</p> <p>Given as injection (bolus) diluted through a saline drip over 5-10 mins.</p> <p>Given as bolus or infusion over 5-10 mins.</p> <p>Given as an infusion over 5-10 mins.</p>
Day 2 (or nearest Tuesday/Friday)	<p>Cyclophosphamide</p> <p>Intrathecal Cytarabine</p>	<p>Given as bolus or infusion over 5-10 mins.</p> <p>Injection into spinal fluid. Performed by specially trained doctor. Administered on the haematology day unit. All intrathecal injections will require platelet count of 50 or higher and normal clotting levels, these will be checked on the day.</p>
Days 3 and 4	Cyclophosphamide	Given as bolus or infusion over 5-10 mins.
Day 5 (or nearest Tuesday/Friday)	<p>Cyclophosphamide</p> <p>Intrathecal Cytarabine</p>	<p>Given as bolus or infusion over 5-10 mins.</p> <p>See day 2 for Intrathecal chemotherapy notes.</p>
Day 6 & 7	No chemotherapy	You may go home for these days if you are well and the blood count satisfactory.
Day 8	<p>Rituximab</p> <p>Vincristine</p>	<p>Given as an infusion over 60 mins (if no previous infusion reaction).</p> <p>Given as bolus over 5-10 mins.</p>
Day 9	No chemotherapy	You may go home for this day if you are well and the blood count satisfactory.
Day 10	I.V. Methotrexate	Given as an infusion for 3.25 hours. You will also have fluids running alongside the chemotherapy. Folinic acid rescue will be given, initially by injection then by mouth. Methotrexate blood levels will be checked at specific times.
Days 11 to 14	No chemotherapy	
Day 15 (or nearest Tue/Fri)	<p>Intrathecal</p> <p>Methotrexate</p>	See day 2 Intrathecal chemotherapy notes.
Day 16 until blood count recovery	No chemotherapy	Waiting for blood counts to recover before starting next cycle of chemotherapy.



Patient guide to R-IVAC

Day 1	<p>Rituximab</p> <p>Etoposide</p> <p>Ifosfamide/Mesna</p> <p>Cytarabine</p> <p>Mesna</p> <p>4 hour break</p> <p>Mesna</p> <p><i>Break after Mesna until 12 hours have passed after previous dose of Cytarabine</i></p> <p>Cytarabine</p> <p><i>Break until 24 hours have passed since start time of day 1</i></p>	<p>If previously received Rituximab without significant reaction this is given as infusion over 60 minutes, otherwise given over a few hours.</p> <p>Given as infusion over 1 hour.</p> <p>Given as infusion over 1 hour once Etoposide has been completed.</p> <p>Given as infusion over 3 hours once Ifosfamide/Mesna has been completed.</p> <p>Given as infusion over 20 minutes once Cytarabine has been completed.</p> <p>Given as infusion over 20 minutes once Cytarabine has been completed.</p> <p>Given as infusion over 3 hours.</p>
Day 2	Same as Day 1 without Rituximab	
Days 3&4	Same as Day 2 without Cytarabine	
Day 5 (or nearest Tuesday/Friday)	Same as Days 3&4 also Intrathecal Methotrexate	Injection into spinal fluid. Performed by specially trained doctor. Administered on haematology day unit. All intrathecal injection will require platelet level of 50 or higher and normal clotting levels, these will be checked on the day.
Day 6 and 7	No chemotherapy	You may go home for these days if you are well and the blood count satisfactory.
Day 8	Rituximab	Given as an infusion over 60 mins (if no previous reaction).
Day 9 until blood count recovery	No chemotherapy	Waiting for blood counts to recover before starting next cycle of chemotherapy.



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The Christie Hotline: 0161 446 3658
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