



## Patient guide to R-CODOX-M

Day 1	<b>Rituximab</b>  <b>Doxorubicin</b>  <b>Cyclophosphamide</b>  <b>Vincristine</b>	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  Given as injection ( bolus) diluted through a saline drip over 5-10mins  Given as bolus or infusion over 5-10mins  Given as an infusion over 5-10mins
Day 2	<b>Cyclophosphamide</b>  <b>Intrathecal Cytarabine</b>	Given as bolus or infusion over 5-10mins  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
Days 3 and 4	<b>Cyclophosphamide</b>	Given as bolus or infusion over 5-10mins
Day 5	<b>Cyclophosphamide</b>  <b>Intrathecal Cytarabine</b>	Given as bolus or infusion over 5-10mins  See day 2 for Intrathecal chemotherapy notes
Day 6 & 7	<b>No chemotherapy</b>	You may go home for these days if you are well and the blood count satisfactory
Day 8	<b>Rituximab</b>  <b>Vincristine</b>	Given as an infusion over 60 mins (if no previous infusion reaction)  Given as bolus over 5-10mins
Day 9	<b>No chemotherapy</b>	You may go home for this day if you are well and the blood count satisfactory
Day 10	<b>I.V. Methotrexate</b>	Given as an infusion for 1 hour, then followed by a 23 hour infusion. 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	<b>No chemotherapy</b>	
Day 15 (or nearest Tue/Fri)	<b>Intrathecal Methotrexate</b>	See day 2 Intrathecal chemotherapy notes
Day 16 until blood count recovery	<b>No chemotherapy</b>	Waiting for blood counts to recover before starting next cycle of chemotherapy