**<TITLE>**

**INDICATION**

**Licensed / CDF indication:**

**Licensed / unfunded indication:**

**TREATMENT INTENT**

**GENERAL PRE-ASSESSMENT**

1.

**ADDITIONAL INVESTIGATIONS**

2.

**REGIMEN SPECIFIC PRE-ASSESSMENT**

**DRUG REGIMEN /**

**CYCLE FREQUENCY**

**RESTAGING**

**DOSE MODIFICATIONS**

**INVESTIGATIONS**

**CONCURRENT MEDICATIONS**

**EMETIC RISK**

**ADVERSE EFFECTS / REGIMEN SPECIFIC COMPLICATIONS**

**TREATMENT RELATED MORTALITY**

**REFERENCES**

**REVIEW**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name** | **Revision** | **Date** | **Version** | **Review date** |
|  |  |  |  |  |