

DATE: ___/___/___

TX # ___/___

BODY WEIGHT IN LBS _____

CASE #:

BODY WEIGHT IN KGS _____

CLIENT NAME:

PATIENT NAME:

M² (FROM CONVERSION CHART) _____**COAP CHEMOTHERAPY PROTOCOL FOR CANINE LYMPHOSARCOMA**

Drug	Dosage	This animal's calculated dose
Cytosine arabinoside (20 mg/mL) (100 & 500 mg vials- stable for 48 hours at room temp after opening)	100 mg/m ² SQ, IV	_____ mg
	days 1,2,3 & 4 ONLY	_____ mL

Half life is short- to increase area under the curve, give as a CRI in saline. This will also increase chances of neutropenia. Consider 2 days IV, followed by 2 days SQ.

Vincristine (1 mg/mL)	0.5 mg/m ² IV weekly x 8 weeks,	_____ mg
	beginning day 1, then	
	every 2 nd week for next 16 weeks,	_____ mL
	then every 3 rd week for next 32 weeks,	
	if still in remission stop treatment at 1 year	

Cyclophosphamide (25, 50 mg tabs)	50 mg/m ² PO first 4 days each treatment week (after vincristine)	_____ mg
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(If hemorrhagic cystitis occurs, discontinue & substitute **chlorambucil** at 4 mg/m² PO eod continuously)

Prednisone (1,5,10,20,50 mg tabs)	40 mg/m ² PO daily x 7 days, then	_____ mg
	20 mg/m ² PO every other day continuously	_____ mg

Prior to each treatment, a CBC should be performed. If the neutrophil count is stable for > 1 month, CBCs can be decreased to once monthly. If the neutrophil count is < 2500, contact the oncology service about dosage adjustments. Broad-spectrum antibiotics should be administered if the neutrophil count is < 1500. Restage prior to each change of treatment interval (week 9 & 25).

PLEASE CONTACT THE ONCOLOGY SERVICE WITH ANY QUESTIONS AT
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