

Your Intraperitoneal (IP) Cisplatin and Paclitaxel Chemotherapy Schedule

For patients who have gynecologic cancer

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 chemotherapy is: _____

About intraperitoneal chemotherapy

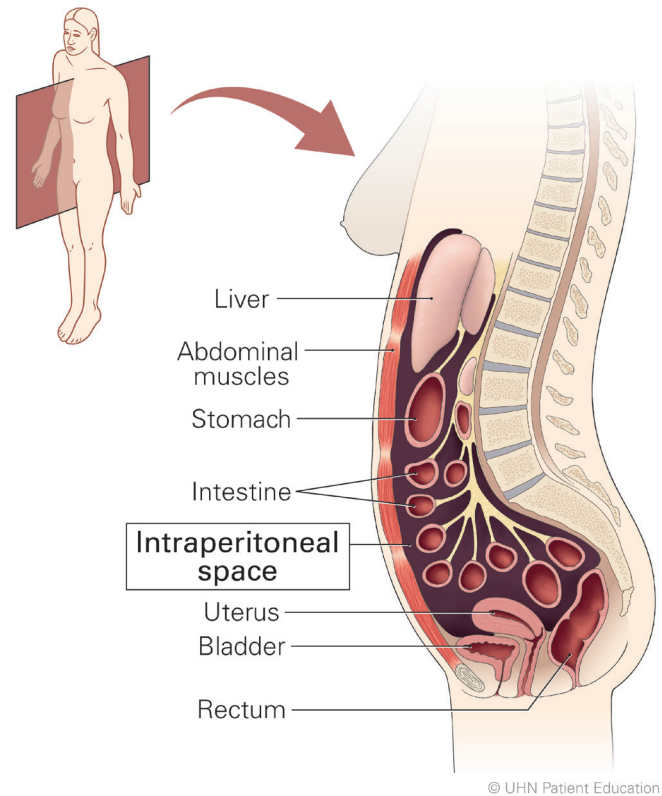
What is intraperitoneal (IP) chemotherapy?

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

The peritoneal space is the space between your abdominal (belly) muscles and your organs. Chemotherapy that is put into this space is called intraperitoneal (IP) chemotherapy. It is put into this space to work right on the cancer cells in the area.

You will be getting 2 chemotherapy medicines called:

- Paclitaxel (goes in your vein and your belly)
- Cisplatin (goes in your belly)



This type of chemotherapy is also known as “IP chemotherapy”.

How long will my chemotherapy last?

You will get IP chemotherapy on Day 1 and Day 8 of the 3 week cycle.

You will then have 14 days off before starting the second cycle.

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

What is an IP port-a-cath and why do I need it?

An IP port-a-cath is a small, round device. It is attached to a flexible tube that is put under the skin near your lower rib cage.

The tubing goes into your peritoneal space. It will look like a small bump under your skin.

An IP port-a-cath will help the chemotherapy get right to where the cancer cells are.

You may get your IP port-a-cath at either of these times:

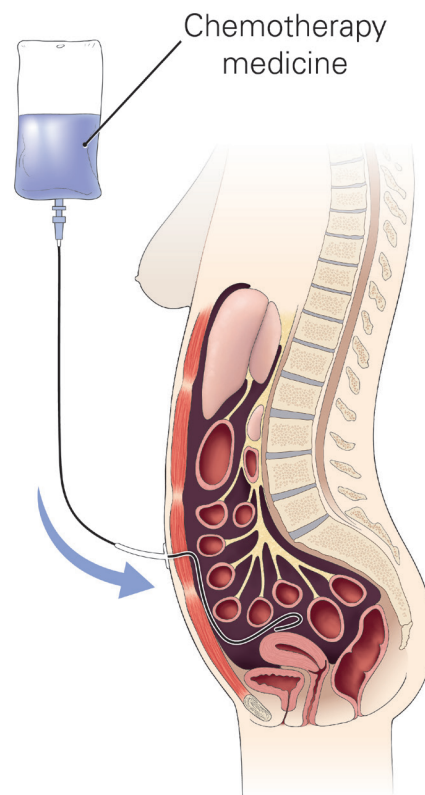
- At the same time as your surgery
- At another appointment after surgery

The IP port-a-cath can be used right after it is put in. You will need to keep it until your chemotherapy is done.

How will I get chemotherapy?

You will get your chemotherapy in 2 ways:

1. **Through an IP port-a-cath in your abdomen (belly).** During your appointment, a nurse will:
 - Put some numbing cream on the skin over your port-a-cath.
 - Insert a needle through your skin, into the port-a-cath. This is not painful. The needle will be attached to tubing and a bag that holds the chemotherapy.
 - You will get the chemotherapy through the port-a-cath in your belly.
 - The nurse will remove the needle once you have received all your chemotherapy.

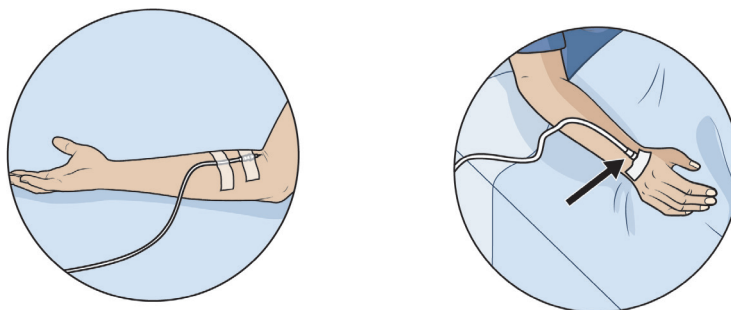


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During the chemotherapy appointment, the nurse will tell you to move from side to side on the bed every 15 to 20 minutes. Your head will be put down lower than your feet for a while. Moving around helps make sure the chemotherapy coats the whole peritoneal space.

Wear comfortable and loose fitting clothing, (like yoga or maternity pants) that will allow your belly room to expand. Your body will absorb the fluid in your belly over the week. It will return to normal size. Read pages 24, 27, 31 and 32.

1. Through an intravenous (IV) needle in your arm. The nurse will insert a needle into a vein on the back of your hand or lower arm. The needle is attached to a plastic tube and a bag of medicine.



Here are images of an IV.

How often will I see my oncologist (cancer doctor) during chemotherapy?

You will see your oncologist (cancer doctor) before each cycle of chemotherapy. Check your appointment schedule for times and dates.

Why do I need to have so many blood tests?

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

1. Decide whether it is safe to give you chemotherapy
2. See whether or not your medicines need to be adjusted

The 3 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.

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, 14, 15 and 16.

Why do I need a home care nurse?

You will need extra fluids during the first week (Day 2, 3 and 4) with this type of chemotherapy. A nurse will visit you at home to give extra fluids to you.

What happens when a home care nurse visits me?

3. Before the home care nurse arrives, the home care pharmacy will deliver supplies. These include intravenous (IV) fluids, IV pole and a pump.
4. A nurse will visit you at home in the morning. The nurse will start an IV to give you fluids for 3 to 4 hours. Then they will leave for a while.
5. Once the IV fluid is done, the nurse will return to unhook the IV. The tube that connects the IV to your arm will stay in place.
6. The next morning, the nurse will come again to give you IV fluids. This process will happen 3 times. On the nurse's last visit, she will remove the IV in your arm

If your nurse was scheduled to visit but now is unable to come:

- Drink 6 cups or 1.5 litres of fluid throughout the day (unless restricted by your doctor). This will keep you hydrated (full of enough fluids).
- Examples of things you can drink include water and juice.

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 in the main lobby of Princess Margaret.

For your chemotherapy treatment:

Go to Chemotherapy Daycare Unit located on the 4th floor of Princess Margaret.

To pick up medicine:

The Princess Margaret Outpatient Pharmacy is located on the main floor.

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

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

For appointments with your oncologist (cancer doctor):

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

What should I bring to my chemotherapy appointment?

- **Your health card (OHIP).**
- **Private insurance information (if you have any).**
- **Money for parking and food.**
- **Any medicine you need to take during the day.**
- **Something to do.** Bring something like a music player with headphones, books, laptops or tablets to keep you busy. You may be in the unit for a long time. There is free WiFi in the hospital.
- **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.
- **If you want, 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)
- constipation (trouble having poo)
- low white blood cells in your blood
- low platelets in your blood
- low red blood cell counts
- cancer-related fatigue (feeling of tiredness that will not go away with sleep)
- hair loss
- joint pain
- peripheral neuropathy (a numb or tingling feeling in your hands or feet)
- hearing loss and ringing in the ears
- uncomfortable abdomen (belly)

Not everyone gets these side effects. Read the section below to learn about each kind. Talk to your oncologist (cancer doctor) or nurse if you have any questions. The phone numbers can be found on page 29.

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.

What you can do 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), aprepitant (Emend) and dexamethasone (Decadron) as prescribed (told by your doctor). See your treatment schedule on page 24 or page 31, or the instructions on the medicine bottle for more details.
- If you still feel like throwing-up, take prochlorperazine (Stemetil). 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). Decadron may cause your blood sugar to go up.

Here are 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. 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 nurse at 416 946 2220 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. Tell the staff there that you are getting chemotherapy treatment.

Constipation

Constipation means it is hard to have a bowel movement (poo). You may have less bowel movements (poo) than is normal for you. Or you may have stool (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 medications or your anti-nausea medicine ondansetron hydrochloride (Zofran) can cause constipation.

What you can do 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 the next page, page 12.
- 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. Walking is best.
- 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: People with ovarian cancer should not increase fibre in their diet if they have or are at risk of bowel obstruction (see page 11 for symptoms of bowel obstruction).

- Do not use suppositories or enemas before asking your doctor.

Note: 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 for 2 days
- Nausea (feeling like you will throw up)
- Vomiting (throwing up)
- Lower back pain
- A bloated stomach
- Not passing gas

These may be a sign of a 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. Tell the staff there that you are getting chemotherapy treatment.

Low white blood cell (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 chemotherapy.

What you can do 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 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 women 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:

1. Take your temperature with a thermometer.
2. Wait 1 hour.
3. 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.

Note: Some pain medications contain acetaminophen (Tylenol) make sure you check your temperature first before taking it.

**Call your Gynecology Resource Nurse
at 416 946 2220 extension # 2 if:**



- Fever over 38 °C (100.4 °F)
- Chills and shaking
- 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 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 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.

What you can do to lower your risk of bleeding:

- Use a soft tooth brush.
- Use an electric razor when shaving.
- Talk to your oncologist (cancer doctor), nurse or pharmacist before taking:
 - Acetylsalicylic acid (Aspirin) or ibuprofen (Advil or Motrin). These medicines can thin your blood and cause bleeding.
 - Any new medicines (including herbal or traditional medicine).

Your health care provider needs to check to see if they are blood thinners.

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

- Blood in your vomit
- Bleeding gums
- Nosebleed
- Blood in your urine (pink pee)
- Blood in your stool (dark, sticky or jelly-like poo)



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

1. 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
2. Or go to your nearest hospital Emergency Department and tell the staff there that you are getting chemotherapy.

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.

What you can do 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 feel:



- Dizzy or light-headed
- Shortness of breath
- Your heart is pounding very fast
- **If you have 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 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.

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 chemotherapy.

What you can do to manage cancer-related fatigue:

Listen to your body. Rest, eat, drink well and take care of yourself.

- 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 (unless restricted by your doctor) of fluid every day. 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 (cancer doctor) or nurse will still need to help you manage this.

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



Hair Loss

Most people who get paclitaxel will lose their hair. 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 pubic hair (hair on your genitals).

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

What you can do 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.
- 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/scarf salon on the 3rd floor. Wigs and scarves may be covered by private insurance. Ask your oncologist (cancer doctor) to provide a prescription.

Pick up the Wig Salon brochure at the Patient and Family Library (main floor lobby, Princess Margaret Cancer Centre).

Joint pain

You may have joint pain during chemotherapy. Some examples of joints are knuckles and knees. The pain will feel like arthritis.

You may start feeling this 1 to 3 days after your chemotherapy appointment. Tell your doctor if you notice this symptom.

What you can do to manage joint pain:

On days 1 to 6 of your chemotherapy schedule:

If you feel pain, take acetaminophen (Tylenol). Take it every 4 to 6 hours, as needed.

On days 7 to 14 of your chemotherapy schedule:

- Follow the instructions on page 13 to check your temperature before you take acetaminophen (Tylenol).
- If you do not have a fever, you can take the acetaminophen (Tylenol).
- Do not skip this step before taking acetaminophen (Tylenol) as the medicine will cover up a possible fever, which can be a sign of infection.

Peripheral neuropathy (a numb or tingling feeling in your hands or feet)

Peripheral neuropathy is numbness and tingling in your fingers and toes. 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.

What you can do to prevent burns:

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

Hearing loss and ringing in the ears

This type of chemotherapy may cause hearing loss and ringing in the ears. You may hear a high-pitched ringing sound in your ear during treatment.

Call your Gynecology Resource Nurse at 416 946 2220 if you notice:



- High pitched ringing in your ears
- Decreased hearing

This is not an emergency. But, your doctor or nurse will still need to help you manage this. For example, if you have hearing loss, your doctor will book you in for a hearing test.

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

Uncomfortable abdomen (belly)

The fluid in your belly may cause some pain and discomfort. Wear loose clothing like yoga or maternity pants. Talk to your doctor if you notice this.

**Call your Gynecology Resource Nurse at
416 946 2220 extension #2 if you have trouble:**



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

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

1. 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
2. Or go to your nearest hospital Emergency Department and tell the staff there that you are getting chemotherapy.

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)
- Aprepitant (Emend)
- Dexamethasone (Decadron)
- Senna (Senokot)
- Prochlorperazine (Stemetil)

Important: Always follow the instructions on your prescription bottle. Call the Pharmacy Triage Line at 416 946 4501 extension 3345 or the Gynecology Oncology Nursing line at 416 946 2220 if you have any questions about your medicines.



Go to your doctor's appointments:

This week you will have an appointment with your oncologist (cancer doctor).



Get a blood test:

Do this at least 1 hour 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 aprepitant (Emend), ondansetron hydrochloride (Zofran) and dexamethasone (Decadron), take prochlorperazine (Stemetil) every 6 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 12 to know who to call right away.



Go to your doctor's appointments:

This week you may have an appointment with your oncologist (cancer doctor).



Get a blood test:

Do this at least 1 hour before your oncologist (cancer doctor) appointment.

Day 1 (1st day of chemotherapy)

1. Wear loose comfortable clothing, like yoga or maternity pants.
2. Bring your ondansetron hydrochloride (Zofran) and aprepitant (Emend) with you to the appointment. The nurse will tell you when to take your medicine.
3. Go to your chemotherapy appointment. The appointment will last for about 8 hours. Here is what you can expect:
 - You will get some anti-nausea medicine through intravenous (IV).
 - The nurse will tell you when to take ondansetron hydrochloride (Zofran) and aprepitant (Emend).
 - You will get IV paclitaxel chemotherapy through a vein in your arm or the back of your hand, for about 3 hours.
 - You will get some warm fluids through your port-a-cath in your belly.
 - You will get IP cisplatin chemotherapy through your port-a-cath for about 2.5 hours.
 - Lastly, you will get more warm fluids through your port-a-cath in your belly.
 - You will be lying down for most of this appointment. The nurse will ask you to move from side to side every 15 to 20 minutes. Moving helps the chemotherapy coat your belly.
4. Take senna (Senokot) at night if you are constipated.

Day 2

1. Take your ondansetron hydrochloride (Zofran), aprepitant (Emend) and dexamethasone (Decadron) **with breakfast**.
2. A home care nurse will come visit you to start an intravenous (IV) to give you fluids for 3 to 4 hours.
3. Once the IV fluid is done, the nurse will return to unhook the IV. The tube that connects the IV to your arm will stay in place.
4. 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.
5. Take senna (Senokot) at night if constipated.

Day 3

1. Take your ondansetron hydrochloride (Zofran), aprepitant (Emend) and dexamethasone (Decadron) **with breakfast**.
2. A home care nurse will come visit you to start an IV to give you fluids for 3 to 4 hours.
3. Once the IV fluid is done, the nurse will return to unhook the IV. The tube that connects the IV to your arm will stay in place.
4. 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.

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 prochlorperazine (Stemetil) every 6 hours as needed.



Go to your doctor's appointments:

This week you may have an appointment with your oncologist (cancer doctor). Not everyone has this appointment.



Get a blood test:

If you have an oncologist (cancer doctor) appointment you will have a scheduled appointment time to get a blood test done 1.5 hours before your appointment.

Day 8

1. Wear loose comfortable clothing, like yoga or maternity pants.
2. Get a blood test done at least 1 hour before your chemotherapy appointment if your oncologist (cancer doctor) orders it.
3. Go to your chemotherapy appointment. The appointment will last for about 4 hours. Here is what you can expect:
 - You will get some warm fluids through your port-a-cath in your belly.
 - You will get IP paclitaxel chemotherapy through your port-a-cath in your belly (about 2.5 hours).
 - You will get some more warm fluids through your port-a-cath in your belly.

Day 9-14

1. Take If you feel nauseous, take prochlorperazine (Stemetil) every 6 hours as needed .

Important: There is no chemotherapy during Week 3 (from Day 15 to Day 21).

Week 3



Take your nausea medicine:

If you still feel nauseous, take prochlorperazine (Stemetil) every 6 hours as needed.

Who to contact if you have questions

Questions about appointment dates 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

Gynecology Oncology Resource Nurse

Phone: 416 946 2220

Press 2, then 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)

Outpatient Pharmacy

Phone: 416 946 6593

The week of chemotherapy



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 Oncology Clinic Reception.



Pick up your medicine from the pharmacy:

You can use the Princess Margaret Outpatient Pharmacy or a pharmacy near you. Go at least 3 days before your 1st treatment appointment. If you choose to use your local pharmacy, go as early as possible to ensure they have cancer-related medicines in stock.

Important: Always follow the instructions on your prescription bottle. Call the Pharmacy Triage Line at 416 946 4501 extension 3345 or the Gynecology Oncology Nursing line at 416 946 2220 if you have any questions about your medicines.



Go to your doctor's appointment:

This week you will have an appointment with your oncologist (cancer doctor).



Get a blood test:

Do this at least 1.5 hours before your oncologist appointment.

Week 1 chemotherapy schedule

Start date (Day 1): _____

Note: If you have an ileostomy/colostomy do NOT take senokot (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	Wear loose clothing	Take ondansetron hydrochloride (Zofran), aprepitant and (Emend) dexamethasone (Decadron) with breakfast	Take ondansetron hydrochloride (Zofran) aprepitant (Emend) and dexamethasone (Decadron) with breakfast				
	Bring ondansetron hydrochloride (Zofran) and aprepitant (Emend) with you to your appointment)						
	Go to chemotherapy appointment (8 hours)	Get a visit from a home care nurse in the morning	Get a visit from a home care nurse in the morning	Get a visit from a home care nurse in the morning			
In the evening	Take senna (Senokot) at night if constipated	Take dexamethasone (Decadron) with dinner before 6:00 pm . Take senna (Senokot) at night if constipated	Take dexamethasone (Decadron) with dinner before 6:00 pm .				



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), aprepitant (Emend) and dexamethasone (Decadron), take prochlorperazine (Stemetil) every 6 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 senna (Senokot). Then, see the instructions on page 12 to know who to call right away.



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

Get a blood test: Do this at least 1 hour before your oncologist appointment.

Week 2 chemotherapy schedule

Start date (Day 8): _____

Note: If you have an ileostomy/colostomy do NOT take colace or 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	Wear loose clothing						
	Go to chemotherapy appointment (4 hours)						
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 you feel nauseous, take Stemetil® (prochlorperazine) every 6 hours, as needed.



Go to your doctor's appointments: This week you may have an appointment with your oncologist (cancer doctor). Not everyone has this appointment.

Get a blood test: If you have an oncologist (cancer doctor) appointment get a blood test done 1 hour before your appointment. If you do not have an oncologist (cancer doctor) appointment, then get a blood test done 1 hour before your chemotherapy appointment.

Week 3



Take your nausea medicine:

If you feel nauseous, take Stemetil® (prochlorperazine) every 6 hours, as needed.



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