

| レジメン情報 |                 | 病院                         |                 | 地域医療機能推進機構 |       |    |   |    |   |   |   |   |   |   |    |   |    |    |    |    |    |    |    |    |    |    |    |    |  |
|--------|-----------------|----------------------------|-----------------|------------|-------|----|---|----|---|---|---|---|---|---|----|---|----|----|----|----|----|----|----|----|----|----|----|----|--|
| レジメンNO | Tmab単独療法(2回目以降) | レジメン名                      | Tmab単独療法(2回目以降) |            |       |    |   |    |   |   |   |   |   |   |    |   |    |    |    |    |    |    |    |    |    |    |    |    |  |
| 癌種別    | 乳がん             | 診療科                        | 外科              | コース日数      | 21日   |    |   |    |   |   |   |   |   |   |    |   |    |    |    |    |    |    |    |    |    |    |    |    |  |
|        |                 | コース数                       | 標準[-]           | 最小[-]      | 最大[-] |    |   |    |   |   |   |   |   |   |    |   |    |    |    |    |    |    |    |    |    |    |    |    |  |
| NO     | 種別              | 内容                         | 数量              | 単位         | 開始    | 時間 | 0 | 1W |   |   |   |   |   |   | 2W |   |    |    |    |    |    | 3W |    |    |    |    |    |    |  |
|        |                 |                            |                 |            |       |    |   | 1  | 2 | 3 | 4 | 5 | 6 | 7 | 8  | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 |  |
| 1      | 注射              | グラニセトロン点滴静注バッグ3mg／50mL「HK」 | 1               | 袋          | 00:00 | -  |   | ○  |   |   |   |   |   |   |    |   |    |    |    |    |    |    |    |    |    |    |    |    |  |
|        |                 | 30分かけて                     |                 |            |       |    |   |    |   |   |   |   |   |   |    |   |    |    |    |    |    |    |    |    |    |    |    |    |  |
|        |                 | 点滴静脈注射                     | 1               | 回          |       |    |   |    |   |   |   |   |   |   |    |   |    |    |    |    |    |    |    |    |    |    |    |    |  |
| 2      | 注射              | 生理食塩液「ヒカリ」 50mL            | 1               | 瓶          | 00:00 | -  |   | ○  |   |   |   |   |   |   |    |   |    |    |    |    |    |    |    |    |    |    |    |    |  |
|        |                 | 全開                         |                 |            |       |    |   |    |   |   |   |   |   |   |    |   |    |    |    |    |    |    |    |    |    |    |    |    |  |
|        |                 | 点滴静脈注射                     | 1               | 回          |       |    |   |    |   |   |   |   |   |   |    |   |    |    |    |    |    |    |    |    |    |    |    |    |  |
| 3      | 注射              | 生理食塩液「ヒカリ」 250mL           | 1               | 袋          | 00:00 | -  |   | ○  |   |   |   |   |   |   |    |   |    |    |    |    |    |    |    |    |    |    |    |    |  |
|        |                 | (癌)トラスツズマブBS点滴静注用          | 6               | mg/Kg      |       |    |   |    |   |   |   |   |   |   |    |   |    |    |    |    |    |    |    |    |    |    |    |    |  |
|        |                 | 30分かけて                     |                 |            |       |    |   |    |   |   |   |   |   |   |    |   |    |    |    |    |    |    |    |    |    |    |    |    |  |
|        |                 | 点滴静脈注射                     | 1               | 回          |       |    |   |    |   |   |   |   |   |   |    |   |    |    |    |    |    |    |    |    |    |    |    |    |  |
| 4      | 注射              | 生理食塩液「ヒカリ」 50mL            | 1               | 瓶          | 00:00 | -  |   | ○  |   |   |   |   |   |   |    |   |    |    |    |    |    |    |    |    |    |    |    |    |  |
|        |                 | 全開                         |                 |            |       |    |   |    |   |   |   |   |   |   |    |   |    |    |    |    |    |    |    |    |    |    |    |    |  |
|        |                 | 点滴静脈注射                     | 1               | 回          |       |    |   |    |   |   |   |   |   |   |    |   |    |    |    |    |    |    |    |    |    |    |    |    |  |