# レジメン登録内容

診療科：**耳鼻咽喉科**　　対象疾患：**頭頸部がん**

申請医師:

コード：J-1003

レジメン名：DAV

承 認 日：2008/10/22

1コース：　28 日間　　標準コース数：　1　回

| Rp | 処方 | DOSE | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | 点滴静注 - メイン | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | グラニセトロン点滴静注3mgバッグ/50mL | 1 Bag/body | ↓ | ↓ | ↓ | ↓ | ↓ | | | | | | | | | | | | | | | | | | | | | | | |
| | 速度：全開で | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2 | 点滴静注 - メイン | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 生理食塩液 250mL | 1 本/body | ↓ | ↓ | ↓ | ↓ | ↓ | | | | | | | | | | | | | | | | | | | | | | | |
| | 時間：1時間 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3 | 点滴静注 - 側管 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | オンコビン注 | 1 mg/body | ↓ | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 生理食塩液注 50mL | 1 本/body | ↓ | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 速度：全開で | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Rp2生理食塩液注と同時に開始 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4 | 点滴静注 - 側管 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | ダカルバジン注 | 100 mg/body | ↓ | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 生理食塩液注 50mL | 1 本/body | ↓ | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 速度：全開で | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Rp3オンコビン終了後に開始。遮光 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5 | 点滴静注 - 側管 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | ニドラン注 | 2 mg/kg | | ↓ | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 生理食塩液注 50mL | 1 本/body | | ↓ | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 速度：全開で | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | ニドラン上限値：3mg/kg | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Rp2生理食塩液注と同時に開始 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Rp | 処方 | DOSE | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 6 | 点滴静注 - 側管 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | ダカルバジン注 | 200 mg/body | | ↓ | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 生理食塩液注 50mL | 1 本/body | | ↓ | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 速度：全開で | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Rp5ニドラン終了後に開始。遮光 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7 | 点滴静注 - 側管 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | ダカルバジン注 | 200 mg/body | | | ↓ | ↓ | ↓ | | | | | | | | | | | | | | | | | | | | | | | |
| | 生理食塩液注 50mL | 1 本/body | | | ↓ | ↓ | ↓ | | | | | | | | | | | | | | | | | | | | | | | |
| | 速度：全開で | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Rp2生理食塩液注と同時に開始。遮光 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |