病名：卵巣癌　　レジメン名：TC（Monthly）＋Beva療法（AUC＝5）

1コース期間（休薬期間含む）　21　日

| 薬剤名／ルート・用法 | 基準投与量 | 割合 | 1/1 | 1/2 | 1/3 | 1/4 | 1/5 | 1/6 | 1/7 | 1/8 | 1/9 | 1/10 | 1/11 | 1/12 | 1/13 | 1/14 | 1/15 | 1/16 | 1/17 | 1/18 | 1/19 | 1/20 | 1/21 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | 火 | 水 | 木 | 金 | 土 | 日 | 月 | 火 | 水 | 木 | 金 | 土 | 日 | 月 | 火 | 水 | 木 | 金 | 土 | 日 | 月 |
| | | | day1 | day2～day21 | | | | | | | | | | | | | | | | | | | |
| | | | 未適用 | 休薬 | | | | | | | | | | | | | | | | | | | |
| 注射 | | | | | | | | | | | | | | | | | | | | | | | |
| 生理食塩液「ヒカリ」50mL | 1 V | | | | | | | | | | | | | | | | | | | | | | |
| 末梢点滴ケモ（持続）加算A | 00:06 | | 未適用 | | | | | | | | | | | | | | | | | | | | |
| 生理食塩液「ヒカリ」100mL | 1 V | | | | | | | | | | | | | | | | | | | | | | |
| ●アバスチン注 400mg 16mL | 15 mg/kg | 100 | | | | | | | | | | | | | | | | | | | | | |
| 末梢点滴ケモ（持続）加算A | 00:07 | | 未適用 | | | | | | | | | | | | | | | | | | | | |
| 生理食塩液「ヒカリ」50mL | 1 V | | | | | | | | | | | | | | | | | | | | | | |
| 末梢点滴ケモ（持続）加算A | 00:08 | | 未適用 | | | | | | | | | | | | | | | | | | | | |
| ﾊﾛﾍﾟﾘﾄﾞﾝ点滴静注ﾊﾞｯｸﾞ 0.75mg 50ml | 1 袋 | | | | | | | | | | | | | | | | | | | | | | |
| デキサート注射液6.6mg 2mL | 2 V | | | | | | | | | | | | | | | | | | | | | | |
| デキサート注 ★3.3mg 1mL | 1 A | | | | | | | | | | | | | | | | | | | | | | |
| アロカリス点滴静注235mg10mL | 1 V | | | | | | | | | | | | | | | | | | | | | | |
| ファモチジン注射液 20mg | 1 A | | | | | | | | | | | | | | | | | | | | | | |
| ボララミン注 5mg 1mL | 1 A | | | | | | | | | | | | | | | | | | | | | | |
| 末梢点滴ケモ（持続）加算A | 00:10 | | 未適用 | | | | | | | | | | | | | | | | | | | | |
| 生理食塩液注 500mL（テルバック） | 1 V | | | | | | | | | | | | | | | | | | | | | | |
| ●パクリタキセル注80mg | 175 mg/m² | 100 | | | | | | | | | | | | | | | | | | | | | |
| 末梢点滴ケモ CSTD（側管） | 00:20 | | 未適用 | | | | | | | | | | | | | | | | | | | | |
| 生理食塩液「ヒカリ」50mL | 1 V | | | | | | | | | | | | | | | | | | | | | | |
| 末梢点滴ケモ（持続）加算A | 00:25 | | 未適用 | | | | | | | | | | | | | | | | | | | | |
| ブドウ糖注 5% 250mL | 1 V | | | | | | | | | | | | | | | | | | | | | | |
| ●カルボプラチン注 450mg 45mL | 5 mg/GFR+25 | 100 | | | | | | | | | | | | | | | | | | | | | |
| 末梢点滴ケモ CSTD（側管） | 00:30 | | 未適用 | | | | | | | | | | | | | | | | | | | | |
| 生理食塩液「ヒカリ」50mL | 1 V | | | | | | | | | | | | | | | | | | | | | | |
| 末梢点滴ケモ（持続）加算A | 00:45 | | 未適用 | | | | | | | | | | | | | | | | | | | | |