病名：　乳癌　　レジメン名：FEC100

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 | | | | | | | | | | | | | | | | | | | | | | | |
| ﾊﾛﾍﾟﾘﾄﾞﾛ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 | 1 V | | | | | | | | | | | | | | | | | | | | | | |
| デキサート注 ★3.3mg 1mL | 1 A | | | | | | | | | | | | | | | | | | | | | | |
| アロカリス点滴静注235mg10mL | 1 V | | | | | | | | | | | | | | | | | | | | | | |
| 末梢点滴ケモ（持続）加算A | 00:10 | | 未適用 | | | | | | | | | | | | | | | | | | | | |
| 生理食塩液「ヒカリ」100mL | 0.5 V | | | | | | | | | | | | | | | | | | | | | | |
| ●エピルビシン塩酸塩注射液☆10mg/5mL[RK] | 100 mg/㎡ | 100 | | | | | | | | | | | | | | | | | | | | | |
| 末梢点滴ケモ CSTD（側管） | 00:15 | | 未適用 | | | | | | | | | | | | | | | | | | | | |
| 生理食塩液「ヒカリ」50mL | 1 V | | | | | | | | | | | | | | | | | | | | | | |
| 末梢点滴ケモ（持続） | 00:20 | | 未適用 | | | | | | | | | | | | | | | | | | | | |
| 生理食塩液「ヒカリ」50mL | 1 V | | | | | | | | | | | | | | | | | | | | | | |
| ●エンドキサン注★ 500mg | 500 mg/㎡ | 100 | | | | | | | | | | | | | | | | | | | | | |
| 末梢点滴ケモ CSTD（側管） | 00:25 | | 未適用 | | | | | | | | | | | | | | | | | | | | |
| 生理食塩液「ヒカリ」50mL | 1 V | | | | | | | | | | | | | | | | | | | | | | |
| 末梢点滴ケモ（持続） | 00:30 | | 未適用 | | | | | | | | | | | | | | | | | | | | |
| ヒシナルク★3号★注 500mL | 1 V | | | | | | | | | | | | | | | | | | | | | | |
| ●フルオロウラシル注 ☆250mg | 500 mg/㎡ | 100 | | | | | | | | | | | | | | | | | | | | | |
| 末梢点滴ケモ CSTD（側管） | 00:35 | | 未適用 | | | | | | | | | | | | | | | | | | | | |
| 生理食塩液「ヒカリ」50mL | 1 V | | | | | | | | | | | | | | | | | | | | | | |
| 末梢点滴ケモ（持続） | 00:40 | | 未適用 | | | | | | | | | | | | | | | | | | | | |