



## TREATMENT PARAMETERS

### WBC COUNT AND ANC MONITORING SCHEDULE

The table below provides a summary of the frequency of monitoring that should occur based on various stages of therapy (e.g., initiation of therapy) or results from WBC count and ANC monitoring tests (e.g., moderate leukopenia). The text that follows should be consulted for additional details regarding the treatment of patients under the various conditions (e.g., severe leukopenia).

FREQUENCY OF MONITORING BASED ON STAGE OF THERAPY OR RESULTS FROM WBC COUNT AND ANC MONITORING TESTS		
SITUATION	HEMATOLOGICAL VALUES FOR MONITORING	FREQUENCY OF WBC AND ANC MONITORING
Initiation of therapy	WBC $\geq 3500/\text{mm}^3$ ANC $\geq 2000/\text{mm}^3$ Note: Do not initiate in patients with 1) history of myeloproliferative disorder or 2) clozapine induced agranulocytosis or granulocytopenia	Weekly for 6 months
6 months to 12 months of therapy	All results for WBC $\geq 3500/\text{mm}^3$ and ANC $\geq 2000/\text{mm}^3$	Every 2 weeks for 6 months
12 months of therapy	All results for WBC $\geq 3500/\text{mm}^3$ and ANC $\geq 2000/\text{mm}^3$	Every 4 weeks ad infinitum
Immature forms present	N/A	Repeat WBC and ANC
Discontinuation of Therapy	N/A	Weekly for at least 4 weeks from day of discontinuation or until WBC $\geq 3500/\text{mm}^3$ and ANC $> 2000/\text{mm}^3$
Substantial drop in WBC or ANC	Single drop or cumulative drop within 3 weeks of WBC $\geq 3000/\text{mm}^3$ or ANC $\geq 1500/\text{mm}^3$	1. Repeat WBC and ANC 2. If repeat values are $3000/\text{mm}^3 \leq \text{WBC} \leq 3500/\text{mm}^3$ and ANC $< 2000/\text{mm}^3$ , then monitor twice weekly
Mild Leukopenia Mild Granulocytopenia	$3500/\text{mm}^3 > \text{WBC} \geq 3000/\text{mm}^3$ and/or $2000/\text{mm}^3 > \text{ANC} \geq 1500/\text{mm}^3$	Twice-weekly until WBC $> 3500/\text{mm}^3$ and ANC $> 2000/\text{mm}^3$ then return to previous monitoring frequency
Moderate Leukopenia Moderate Granulocytopenia	$3000/\text{mm}^3 > \text{WBC} \geq 2000/\text{mm}^3$ and/or $1500/\text{mm}^3 > \text{ANC} \geq 1000/\text{mm}^3$	1. Interrupt therapy 2. Daily until WBC $> 3000/\text{mm}^3$ and ANC $> 1500/\text{mm}^3$ 3. Twice-weekly until WBC $> 3500/\text{mm}^3$ and ANC $> 2000/\text{mm}^3$ 4. May rechallenge when WBC $> 3500/\text{mm}^3$ and ANC $> 2000/\text{mm}^3$ 5. If rechallenged, monitor weekly for one year before returning to the usual monitoring schedule of every 2 weeks for 6 months and then every 4 weeks ad infinitum
Severe Leukopenia Severe Granulocytopenia	WBC $< 2000/\text{mm}^3$ and/or ANC $< 1000/\text{mm}^3$	1. Discontinue treatment and do not rechallenge patient 2. Monitor until normal and for at least 4 weeks from day of discontinuation as follows: • Daily until WBC $> 3000/\text{mm}^3$ and ANC $> 1500/\text{mm}^3$ • Twice weekly until WBC $> 3500/\text{mm}^3$ and ANC $> 2000/\text{mm}^3$ • Weekly after WBC $> 3500/\text{mm}^3$
Agranulocytosis	ANC $\leq 500/\text{mm}^3$	1. Discontinue treatment and do not rechallenge patient 2. Monitor until normal and for at least 4 weeks from day of discontinuation as follows: • Daily until WBC $> 3000/\text{mm}^3$ and ANC $> 1500/\text{mm}^3$ • Twice weekly until WBC $> 3500/\text{mm}^3$ and ANC $> 2000/\text{mm}^3$ • Weekly after WBC $> 3500/\text{mm}^3$