

Pembrolizumab, Paclitaxel, Carboplatin, and Bevacizumab

Care Team Contact Information: _____

Pharmacy Contact Information: _____

Diagnosis: _____

- This treatment is often used for cervical cancer.
- It may also be used for other reasons.

Goal of Treatment: _____

- Treatment may continue for a certain time period, until it no longer works, or until side effects are no longer controlled.

Treatment Regimen

Treatment Name	How the Treatment Works	How the Treatment is Given
Pembrolizumab (pem-broh-LIH-zoo-mab): Keytruda (kee-TROO-duh)	Boosts your immune system to help it attack cancer cells more effectively.	Infusion into a vein (intravenous (IV) infusion).
Paclitaxel (PA-klih-TAK-sil): Taxol (TAK-ol)	Slows down or stops the growth of cancer cells by preventing cancer cells from properly dividing and creating new cells.	Infusion into a vein (intravenous (IV) infusion).
Carboplatin (KAR-boh-pla-tin): Paraplatin (PAIR-ah-PLAT-in)	Slows down or stops the growth of cancer cells by damaging the genetic material that cancer cells need to multiply.	Infusion into a vein (intravenous (IV) infusion).
Bevacizumab (beh-vuh-SIH-zoo-mab): Avastin (uh-VAS-tin), Alimta, Avzivi, Jobevne, Mvasi, Vegzelma, Zirabev	Slows down or stops cancer growth by blocking the blood vessels that tumors need to get the nutrients and oxygen they require.	Infusion into a vein (intravenous (IV) infusion).

Note: Your care team may give you pembrolizumab and bevacizumab (Keytruda Qlex) instead of pembrolizumab. Pembrolizumab and bevacizumab is given as an injection under the skin (subcutaneous injection) into the stomach area (abdomen) or outer thigh over 1 to 2 minutes.

Treatment Administration and Schedule

Treatment is typically repeated every 3 weeks. This length of time is called a “cycle”.

Cycles 1 to 6

- Pembrolizumab is given on Day 1.
- Paclitaxel is given on Day 1.
- Carboplatin is given on Day 1.
- Bevacizumab is given on Day 1.

Treatment Name	Cycle 1								Next Cycle
	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	...	Day 21	Day 1
Pembrolizumab	✓								✓
Paclitaxel	✓								✓
Carboplatin	✓								✓
Bevacizumab	✓								✓

Cycle 7 and Beyond

- Pembrolizumab is given on Day 1.
- Bevacizumab is given on Day 1.

Treatment Name	Cycle 1								Next Cycle
	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	...	Day 21	Day 1
Pembrolizumab	✓								✓
Bevacizumab	✓								✓

Appointments

Appointments may include regular check-ups with your care team, treatment appointments, lab visits, and imaging tests. It's important to keep your appointments whenever you can. If you miss any appointments, call your care provider as soon as possible to reschedule your appointment.

Supportive Care to Prevent and Treat Side Effects

Description	Supportive Care Given at the Clinic or Hospital	Supportive Care Taken at Home
To help lower the risk of infusion-related reactions		
To help prevent or treat nausea and vomiting		
Other		

Common Side Effects

Side Effect	Important Information
Infusion-Related Reactions (Boxed Warning)	Description: An infusion reaction is a bad response that can happen during or shortly after receiving medicine through a vein. Infusion reactions can occur with pembrolizumab, paclitaxel, carboplatin, and bevacizumab. Recommendations: - Your care team may prescribe medicines before your infusion to help reduce your risk of infusion reactions or make any infusion reaction less severe. - You may be monitored for infusion reactions during each infusion. - Your care team may slow down or stop your infusion, or completely stop treatment if you have an infusion reaction. Get medical help right away if you develop any of the following during or after your infusion: - Chills or shaking - Itching, rash, or flushing - Trouble breathing, wheezing, or tongue swelling - Dizziness or feeling faint - Feeling of impending doom - Fever of 100.4°F (38°C) or higher - New or severe pain in your back or neck
Low White Blood Cell (WBC) Count (Neutropenia) and Increased Risk of Infection (Boxed Warning)	Description: WBCs help protect your body from infections. A low WBC count increases your risk of getting infections. Recommendations: - Wash your hands often and bathe regularly. - Avoid crowded places and close contact with people who are sick. - Follow food safety and wound care advice from your care team. - Your care team may prescribe medicine to help your WBCs recover. Talk to your care team if you have: - Fever of 100.4°F (38°C) or higher - Chills - New or worsening cough or sore throat - Painful urination or signs of a urinary infection - Feeling much more tired than usual - Red, swollen, warm, or painful areas on the skin (possible skin infection)
Low Platelet Count (Thrombocytopenia)	Description: Platelets help your blood clot and wounds heal. A low platelet count increases your risk of bruising and bleeding. Recommendations: - Blow your nose gently and avoid picking it. - Brush your teeth gently with a soft toothbrush and keep good oral hygiene. - Use an electric razor for shaving and a nail file instead of nail clippers. - Avoid over-the-counter medicines that can increase bleeding risk (for example, nonsteroidal anti-inflammatory drugs (NSAIDs) like ibuprofen). - Talk with your care team or dentist before medical or dental procedures — you may need to pause treatment. Talk to your care team if you have: - A nosebleed lasting more than 5 minutes despite pressure - A cut that continues to bleed - Heavy gum bleeding when brushing or flossing - Sudden or severe headache - Blood in your urine or stool - Blood in your spit after coughing

Low Red Blood Cell (RBC) Count and Hemoglobin (Hgb) (Anemia)	Description: RBCs and Hgb carry oxygen to your body's tissues and remove carbon dioxide. Low RBC or Hgb (anemia) can make you feel weak, very tired, or look pale. Recommendations: • Aim for 7 to 8 hours of sleep each night. • Do not drive, operate heavy machinery, or do other dangerous activities if you are very tired. • Balance activity and rest — stay as active as you can, but rest when needed. • Eat a balanced diet and follow any nutrition or supplement advice from your care team. Talk to your care team if you have: • Shortness of breath • Dizziness or fainting • Fast or irregular heartbeats • Sudden or severe headache
Fatigue	Description: Fatigue is a constant and sometimes strong feeling of tiredness. Recommendations: • Routine exercise can help reduce fatigue. Talk with your care team to find the right type and amount of activity for you. • Ask family and friends for help with daily tasks and for emotional support. • Try healthy ways to feel better, such as meditation, journaling, yoga, or guided imagery, to reduce anxiety and improve well-being. • Aim for 7 to 8 hours of sleep each night. Limit daytime naps to help you sleep better at night. • Do not drive, operate heavy machinery, or do other potentially dangerous activities if you are very tired. Talk to your care team if you have: • Tiredness that affects your daily life or prevents you from doing normal activities • Tiredness that does not get better with rest • Dizziness or weakness along with severe tiredness
High Blood Pressure (Hypertension)	Description: High blood pressure means the force of blood against your artery walls is too high. Treatment can raise your blood pressure or make it harder to control. Recommendations: • Exercise regularly, control your weight, and limit alcohol and salt (sodium). • Take blood pressure medicines as prescribed. Your care team may change your medicines if needed. • Your care team may ask you to check and record your blood pressure at home. Bring readings to appointments. • Follow diet and lifestyle advice from your care team. Talk to your care team if you have: • Severe or new headaches • Dizziness or lightheadedness • Blurred vision • Trouble breathing • Nosebleeds that do not stop • A pounding sensation in your chest, neck, or ears • Irregular or fast heartbeats • Chest pain or pressure

Nausea and Vomiting	Description: Nausea is an uncomfortable feeling in your stomach or the need to throw up. You may or may not vomit. Recommendations: • Eat smaller, more frequent meals. • Avoid fatty, fried, spicy, or highly sweet foods. • Eat bland foods at room temperature and drink clear liquids. • If you vomit, start with small sips of water, broth, or other clear liquids. If these stay down, try soft foods (such as gelatin, plain cornstarch pudding, yogurt, strained soup, or strained cooked cereal) and gradually return to solid foods. • Your care team may prescribe medicine for these symptoms. Talk to your care team if you have: • Vomiting for more than 24 hours • Nonstop vomiting • Signs of dehydration (very thirsty, dry mouth, dizziness, or dark urine) • Blood or coffee-ground-like appearance in your vomit • Severe stomach pain that does not go away after vomiting
Liver Problems	Description: Treatment can cause liver injury. Your care team may check your liver with blood tests before and during treatment. Talk to your care team if you have: • Yellowing of your skin or the white part of your eyes (jaundice) • Severe nausea or vomiting • Pain on the right side of your stomach area (abdomen) • Dark, tea-colored urine • Bleeding or bruising more easily than normal

Low Appetite

Description: Loss of appetite can lead to weight loss and low energy. Small changes in when and what you eat can help maintain strength and nutrition.

Recommendations:

- Be as active as you can. Do light physical activity before a meal (check with your care team before starting an exercise program).
- Note times of day when your appetite is best and eat your largest meal then.
- Eat 5–6 small meals or snacks each day.
- Choose high-protein foods (beans, chicken, fish, meat, yogurt, tofu, eggs). Eat protein first during meals.
- Choose higher-calorie foods (avoid “low-fat,” “fat-free,” or “diet” options when trying to gain/maintain weight).
- If you feel full quickly, avoid drinking 30 minutes before a meal and drink liquids between meals; choose calorie-containing drinks rather than diet drinks.
- Have a bedtime snack that’s easy to digest (for example, peanut butter and crackers). If you have reflux, wait at least 1 hour before lying down.
- Try nutritious beverages (high-protein shakes or smoothies) if solid food is unappealing.
- Ask your care team about liquid nutrition supplements and ways to add protein or calories (protein powder, yogurt, ice cream).

Talk to your care team if you have:

- Unintentional weight loss
- Little or no appetite for several days
- Excessive tiredness or low energy

Diarrhea	Description: Diarrhea is loose, watery stools or more frequent bowel movements than usual. It can cause dehydration and weakness. Recommendations: • Keep track of how often you go to the bathroom each day. • Drink 8 to 10 glasses of water or other fluids daily, unless your care team tells you otherwise. • Eat small meals of mild, low-fiber foods (such as bananas, applesauce, potatoes, chicken, rice, and toast). • If you have diarrhea, avoid high-fiber foods (such as raw vegetables, fruits, and whole grains), gas-producing foods (such as broccoli and beans), dairy (such as milk and yogurt), and spicy, fried, or greasy foods. • Your care team may recommend an antidiarrheal medicine such as loperamide (Imodium). Talk to your care team if you have: • 4 or more bowel movements than normal in 24 hours • Dizziness or lightheadedness while having diarrhea • Signs of dehydration (very thirsty, dry mouth, dizziness, or dark urine) • Bloody diarrhea • Severe stomach-area (abdominal) pain or tenderness
Constipation	Description: Constipation means hard, dry stools or fewer bowel movements than normal. It can cause discomfort or pain. Recommendations: • Track how often you have bowel movements each day. • Drink 8 to 10 glasses of fluids daily, unless your care team says otherwise. • Stay active and exercise regularly. • Eat more high-fiber foods (such as raw fruits, vegetables, and whole grains) unless advised otherwise. • Your care team may recommend laxatives such as polyethylene glycol (Miralax) or senna. Talk to your care team if you have: • Constipation lasting 3 or more days • No bowel movement 48 hours after using a laxative • Severe stomach-area (abdominal) pain or tenderness
Headache	Description: Headaches are pain in your head that can vary in intensity, frequency, and location. Recommendations: • Keep a headache diary to track the frequency, duration, intensity, and triggers of your headaches. • Stay hydrated by drinking plenty of water, as dehydration can contribute to headaches. • Apply a cold or warm compress to your forehead or neck to help ease headache pain. • Get adequate sleep (7 to 8 hours per night) and establish a regular sleep schedule. • Limit caffeine intake. • Your care team may recommend medicine for headaches. Talk to your care team if you have: • Severe headache • More frequent or worsening headaches • Dizziness or feeling faint • Confusion • Changes in vision

Numbness, Tingling, or Burning in Your Hands or Feet (Peripheral Neuropathy)	Description: Nerve pain and tingling are uncomfortable sensations from nerve damage or irritation. Pain may be sharp, burning, or deep. Tingling can feel like pins-and-needles or mild electric shocks, often in the hands, feet, arms, or legs. Recommendations: • Keep a daily log of pain and sensations, noting triggers and what helps or makes it worse. • Check your feet every day for cuts, sores, blisters, or color changes, especially if numbness reduces feeling. • Wear comfortable, well-fitting shoes and avoid walking barefoot if sensation is reduced. • Protect hands and feet from extreme heat or cold. • Your care team may recommend or prescribe medicines, topical treatments, physical therapy, or supplements to help with symptoms. Talk to your care team if you have: • New or worsening “pins and needles”, burning, or numbness in your hands or feet • Trouble moving your arms or legs, or weakness • Problems with balance or frequent falls
Muscle or Joint Pain or Weakness	Description: Muscle pain is soreness, aching, cramps, stiffness, tenderness, or weakness in one or more muscles. Joint pain is pain, stiffness, swelling, or reduced movement where two bones meet. Recommendations: • Keep a pain diary: note pain levels, locations, and activities that make it better or worse. • Do gentle exercise (walking, stretching, yoga) to maintain mobility and strength. Check with your care team before starting a new activity. • Use a warm compress for stiff muscles or a cold pack to reduce swelling and numb pain—use what helps the area. • Your care team may recommend or prescribe medicines, including over-the-counter pain relievers. Talk to your care team if you have: • Pain you cannot control with usual measures • Swelling, redness, or warmth in a joint • New weakness • Trouble walking or moving

Hair Loss (Alopecia)	Description: Hair loss or thinning may begin days to weeks after treatment starts and usually grows back later. New growth can be a different color or texture and may not look the same as before. Recommendations: - Consider a short haircut before treatment and use scarves, hats, or wigs for comfort and confidence. - Keep your head covered outdoors to protect it from the sun and cold; use sunscreen on your uncovered scalp. - Use gentle haircare: mild shampoo, soft brush, and avoid heat styling and harsh treatments. - Ask your care team about wig prescriptions or resources for head coverings. Talk to your care team if you have: - No hair regrowth months after treatment ends - Concern about hair changes or need help finding a wig or support resources
Rash or Itchy Skin	Description: Rash or itchy skin can cause redness, swelling, and a variety of bumps or patches (small red spots, welts, blisters, or scaly dry areas). Recommendations: - Keep your skin moisturized with creams or lotions to reduce rash and itchiness. - Wear loose-fitting clothing. - Avoid perfumes and colognes, as they may worsen rash symptoms. - Limit time spent in the heat to prevent worsening symptoms. - Avoid sun exposure, especially between 10 AM and 4 PM, to lower the risk of sunburn. - Wear long-sleeved clothing with ultraviolet (UV) protection and broad-brimmed hats. - Apply broad-spectrum sunscreen (UVA/UVB) with sun protective factor (SPF) 30 or higher as directed. - Use lip balm with SPF 30 or higher. - Avoid tanning beds. - Your care team may recommend medicines for symptoms. Talk to your care team if you have: - Rash or itching that continues to worsen

Select Rare Side Effects

Side Effect	Talk to Your Care Team if You Have Any of These Signs or Symptoms	
Heart Problems, Including Heart Failure	Bevacizumab can cause heart failure that may lead to death. Your care team may check your heart function before and during treatment with bevacizumab. - Swelling of your stomach area (abdomen), legs, hands, feet, or ankles - Shortness of breath - Nausea or vomiting - New or worsening chest discomfort, including pain or pressure - Weight gain - Pain or discomfort in your arms, back, neck, or jaw - Protruding neck veins - Breaking out in a cold sweat - Feeling lightheaded or dizzy	
Blood Clots or Blockage (Thrombosis) in Your Blood Vessels (Arteries and Veins)	- Chest pain or pressure - Swelling or pain in your arms, back, neck, or jaw - Shortness of breath - Numbness or weakness on one side of your body - Trouble talking - Headache - Vision changes	
Hearing Loss	- New or worsening hearing loss - Ringing, buzzing, or other noises in your ears (tinnitus) - Trouble understanding speech or needing higher volume on devices - Dizziness or balance problems	
A Tear in Your Stomach or Intestinal Wall (Perforation) or an Abnormal Connection Between 2 Parts of Your Body (Fistula)	Bevacizumab may increase the risk of developing gastrointestinal perforations and fistulae. - Severe pain or tenderness in your stomach area (abdomen) - Swelling of the abdomen - Fever of 100.4°F (38°C) or higher - Chills - Nausea - Vomiting - Signs of dehydration (very thirsty, dry mouth, dizziness, or dark urine)	
Intestinal Problems	- Diarrhea (loose stools) or more frequent bowel movements than usual - Severe stomach-area (abdominal) pain or tenderness - Stools that are black, tarry, sticky, or have blood or mucus	
Protein in Your Urine and Possible Kidney Problems	Your care team may check your urine for protein before and during treatment. They may adjust or stop your treatment if protein is found. - Swelling in your hands, arms, legs, or feet - Decrease in your amount of urine - Blood in your urine - Swelling of your ankles - Loss of appetite	

Lung Problems	• Cough • Shortness of breath	• Chest pain
Hormone Gland Problems	• Headaches that will not go away, or unusual headaches • Eye sensitivity to light • Eye problems • Rapid heartbeat • Increased sweating • Extreme tiredness • Weight gain or weight loss • Feeling more hungry or thirsty than usual	• Urinating more often than usual • Hair loss • Feeling cold • Constipation • Your voice gets deeper • Dizziness or fainting • Changes in mood or behavior, such as decreased sex drive, irritability, or forgetfulness
Severe Jawbone Problems (Osteonecrosis of the Jaw)	Osteonecrosis of the jaw (ONJ) is a rare but serious condition in which jawbone cells die, sometimes causing the bone to become exposed through the gums and leading to further bone loss because blood cannot reach the exposed area. Your care team may ask you to see your dentist before starting and during treatment. • Jaw swelling or pain • Loose teeth • Mouth sores • Pus-like discharge in your gums and mouth	
Posterior Reversible Encephalopathy Syndrome (PRES)	A neurologic condition called PRES can happen during treatment with bevacizumab. • Severe headache • Confusion • Weakness • Seizures • Blindness or change in vision	
Risk of New Cancers	There is a risk of developing new cancers during or after treatment. Talk with your care team about this risk, and ask about the signs and symptoms of new cancers.	
Problems in Other Organs and Tissues	• Chest pain, irregular heartbeat, shortness of breath, swelling of ankles • Double vision, blurry vision, sensitivity to light, eye pain, changes in eyesight	• Confusion, sleepiness, memory problems, changes in mood or behavior, stiff neck, balance problems, tingling or numbness of the arms or legs
Injection-Site Reactions (Pembrolizumab and Pembrolizumab and Berahyaluronidase)	• Itching • Swelling • Bruising or bleeding	• Pain • Rash or redness of the skin

Before starting treatment, ask your care team when to call 9-1-1 or seek emergency help.
If you experience any new, worsening, or uncontrolled side effects, contact your care team immediately.

Intimacy, Fertility, Pregnancy, and Breastfeeding

- Treatment may **change how you feel about intimacy and your body**. However, physical closeness—such as holding hands and hugging—remains safe. It is common to have questions about intimacy. If needed, talk to your care team for guidance.
- Treatment can affect your **ability to have children**. It may damage your reproductive organs or stop them from working. If you are worried about fertility, talk to your care team before starting treatment.
- Treatment may **harm an unborn baby**.
 - If you are able to become pregnant:
 - Take a pregnancy test before starting treatment.
 - Use an effective method of birth control during treatment with paclitaxel and carboplatin, for 4 months after your last dose of pembrolizumab, and for 6 months after your last dose of bevacizumab.
 - If you think you might be pregnant or if you become pregnant, tell your care team right away.
 - If your partner is able to become pregnant, use an effective method of birth control—such as condoms—during treatment with pembrolizumab, paclitaxel, carboplatin, and bevacizumab.
- **Do NOT breastfeed** during treatment with paclitaxel and carboplatin, for 4 months after your last dose of pembrolizumab, and for 6 months after your last dose of bevacizumab.

Handling Body Fluids and Waste

Some drugs you receive may stay in your urine, stool, sweat, or vomit for many days after treatment. Because many cancer drugs are toxic, your body waste may also be dangerous to touch. To help protect yourself, your loved ones, and the environment, **follow these instructions** for at least **48 hours** after each dose of **carboplatin** and for at least **4 days** after each dose of **paclitaxel**: (Note: Pembrolizumab and bevacizumab do not require special handling of body fluids and waste.)

- People who are pregnant should avoid touching anything that may be soiled with body fluids from the patient.
- You can use your usual toilet. Always close the lid and flush to discard all waste. If you have a low-flow toilet, flush twice.
- If the toilet or seat is soiled with urine, stool, or vomit, clean the surface after each use before others use it.
- Wash your hands with soap and water for at least 20 seconds after using the toilet.
- If you need a bedpan, inform your caregiver so they can wear gloves and assist with cleanup. Wash the bedpan with soap and water daily.
- If you cannot control your bladder or bowels, use a disposable pad with a plastic back, a diaper, or a sheet to absorb waste.
- Wash any skin exposed to body waste with soap and water.
- Wash soiled linens or clothing separately from other laundry. If you don't have a washer, place them in a plastic bag until they can be washed.
- Wash your hands with soap and water after touching soiled linens or clothing.

- **Tell your care team about all the medicines you take.**
This includes prescriptions, over-the-counter drugs, vitamins, and herbal products. Before starting any new medicine, supplement, or vaccine, ask your care team first.
- **Your treatment may cause side effects that need medicine or a break from treatment.** Your care team may give you corticosteroids or hormone medicines to help. Sometimes, they may need to delay or stop your treatment if you have certain side effects.
- **Tell your care team about all your health problems.** This includes issues with your immune system, like Crohn's disease, ulcerative colitis, or lupus. Also, tell them if you have had an organ transplant, like a kidney or eye transplant. Let them know if you had a stem cell transplant from a donor, had radiation to your chest, or have a nerve problem like myasthenia gravis or Guillain-Barré syndrome.
- **Wound healing problems.** Wounds may not heal properly during bevacizumab treatment. Tell your care team if you plan to have any surgery before starting or during treatment with bevacizumab.
 - You should not receive bevacizumab for at least 28 days before planned surgery.
 - Your care team should tell you when you may start receiving bevacizumab again after surgery.
- **This Patient Education Sheet may not describe all possible side effects.**
Call your care team for medical advice about side effects. You may report side effects to the FDA at 1-800-FDA-1088.

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