Trastuzumab, Carboplatin, and Paclitaxel

Care Team Contact Information: _____

Pharmacy Contact Information: _____

Diagnosis: _____

- This treatment is used for breast cancer and a type of uterine cancer called endometrial cancer.
- It may also be used for other reasons.
- Your care team will perform a test for a specific abnormal type of human epidermal growth factor receptor 2 (HER2) gene to make sure trastuzumab, carboplatin, and paclitaxel is right for you.

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
Trastuzumab (tras-TOO-zoo-mab): Herceptin (her-SEP-tin), Hercessi, Herzuma, Kanjinti, Ogivri, Ontruzant, Trazimera	Slows down or stops cancer growth by blocking a specific protein that cancer cells need to survive.	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).
Paclitaxel (PA-klih-TAK-sil): Taxol (TAK-saal)	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).

Note: Your care team may give you trastuzumab and hyaluronidase (Herceptin Hylecta) instead of trastuzumab. Trastuzumab and hyaluronidase is given as an injection under the skin (subcutaneous injection) into the thigh over 2 to 5 minutes.

Treatment Administration and Schedule

Treatment is typically repeated every 21 days or every 28 days. This length of time is called a “cycle.” You may receive up to 6 cycles with trastuzumab, carboplatin, and paclitaxel, followed by treatment with trastuzumab alone. Your care team will tell you how many treatment cycles you will receive and how long you will continue taking trastuzumab.

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Treatment Administration and Schedule (Continued)

☐ **Option 1: Every 21 Days (Breast Cancer)**

- Trastuzumab is given on Days 1, 8, and 15.
  - After about 6 cycles of treatment with trastuzumab, carboplatin, and paclitaxel, you may continue treatment with trastuzumab alone once weekly.
- Carboplatin is given on Day 2.
- Paclitaxel is given on Day 2.

Treatment Name	Cycle 1									Next Cycle	
	Day 1	Day 2	Day 3	…	Day 8	…	Day 15	…	Day 21	Day 1	Day 2
Trastuzumab	✓				✓		✓			✓	
Carboplatin		✓									✓
Paclitaxel		✓									✓

☐ **Option 2: Every 28 Days (Breast Cancer)**

- Trastuzumab is given on Days 1, 8, 15, and 22.
  - After about 6 cycles of treatment with trastuzumab, carboplatin, and paclitaxel, you may continue treatment with trastuzumab alone once every 21 days.
- Carboplatin is given on Days 1, 8, and 15.
- Paclitaxel is given on Days 1, 8, and 15.

Treatment Name	Cycle 1										Next Cycle
	Day 1	Day 2	…	Day 8	…	Day 15	…	Day 22	…	Day 28	Day 1
Trastuzumab	✓			✓		✓		✓			✓
Carboplatin	✓			✓		✓					✓
Paclitaxel	✓			✓		✓					✓

☐ **Option 3: Every 21 Days (Endometrial Cancer)**

- Trastuzumab is given on Day 1.
  - After about 6 cycles of treatment with trastuzumab, carboplatin, and paclitaxel, you may continue treatment with trastuzumab alone every 21 days.
- Carboplatin is given on Day 1.
- Paclitaxel 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
Trastuzumab	✓								✓
Carboplatin	✓								✓
Paclitaxel	✓								✓

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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 an appointment, call your care team as soon as possible to reschedule it.

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 your body make white blood cells to fight infections		
To help prevent or treat nausea and vomiting		
Other		

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Common Side Effects

Side Effect	Important Information
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 infection. 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
Low Platelet Count (Thrombocytopenia) (Boxed Warning)	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) (Boxed Warning)	Description: Red blood cells carry oxygen throughout your body. Low levels can make you feel tired, weak, dizzy, or short of breath 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

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Allergic Reactions, Including Anaphylaxis and Infusion-Related Reactions (Boxed Warning)	Description: Allergic reactions are common during treatment with trastuzumab, carboplatin, and paclitaxel, and can sometimes be serious. Serious allergic reactions can happen during or after your trastuzumab, carboplatin, and paclitaxel infusion, including life-threatening allergic reactions and serious infusion-related reactions that may lead to death. Talk to your care team if you have: • Itchy, raised bumps on the skin (hives) • Coughing that does not go away • Nausea or vomiting • Stomach (abdominal) pain • Increased saliva • Breathing problems such as wheezing • Throat tightness or change in voice • Fever of 100.4°F or higher • Chest discomfort • Chills or shaking • Back pain
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

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<table>
<tr><td>Nausea and Vomiting</td><td>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 in your vomit or vomit that looks like coffee grounds
Severe stomach pain that does not go away after vomiting</td></tr>
<tr><td>Stomach-Area (Abdominal) Pain</td><td>Description: Abdominal pain is when you feel discomfort or pain in the belly area.

Talk to your care team if you have:
Severe abdominal pain</td></tr>
<tr><td>Diarrhea</td><td>Description: Diarrhea means having bowel movements more often than usual. Your stools may also be loose or watery.

If you have diarrhea:
Keep track of how often you have diarrhea.
Drink 8 to 10 glasses of water or fluids each day. Do this unless your care team tells you otherwise.
Eat small meals with low-fiber foods. Try bananas, applesauce, potatoes, chicken, rice, or toast.
Avoid high-fiber foods. These include raw vegetables, fruit, and whole grains.
Avoid foods that may cause gas. These include broccoli and beans.
Avoid milk, yogurt, and other dairy foods.
Avoid spicy, fried, or greasy foods.
Your care team may recommend medicine for diarrhea. One example is loperamide (Imodium).
Talk to your care team if you have:
An increase of 4 or more bowel movements than usual in one day
Dizziness or lightheadedness while you have diarrhea
Signs of dehydration, such as feeling very thirsty, dizzy, or having dark urine
Blood in your stool</td></tr>
</table>

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Cough	Description: A cough is a reflex action that forcefully expels air from the lungs to clear the airways of irritants or mucus. Recommendations: • Tell your care team what your cough feels like and when it happens. • Use a humidifier and drink plenty of water. • Keep your house clean by dusting and vacuuming regularly • Avoid exposure to smoke or strong chemicals. • Your care team may recommend medicine for cough. Talk to your care team if you have: • Trouble breathing • Chest pain or tightness • Coughing up blood
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

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<table>
<tr><td>Muscle, Bone, or Joint Pain</td><td>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. Bone pain is a deep, aching or sharp pain in or around a bone that may worsen with movement or pressure.

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</td></tr>
<tr><td>Pain</td><td>Description: Pain is an uncomfortable feeling that can happen anywhere in your body and can vary in intensity. It can be sharp, throbbing, aching, or burning, and it may feel like discomfort or pressure.

Recommendations:
Keep a pain diary to track the frequency, duration, and intensity of your pain.
Your care team may recommend medicines for pain.
Talk to your care team if you have:
Uncontrolled pain</td></tr>
<tr><td>Hair Loss (Alopecia)</td><td>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; apply sunscreen to your exposed 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</td></tr>
</table>

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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

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Select Rare Side Effects

Side Effect	Talk to Your Care Team if You Have Any of These Signs or Symptoms	
Heart Problems (Boxed Warning)	• Fast or irregular heartbeats • Swelling of your stomach area (abdomen), legs, hands, feet, or ankles • Shortness of breath • New or worsening chest discomfort, including pain or pressure	• Nausea or vomiting • 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
Lung Problems (Boxed Warning)	• Cough • Shortness of breath	• Chest pain or tightness
Liver Problems	• 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
Kidney Problems	• Decrease in your amount of urine • Blood in your urine	• Swelling of your ankles • Loss of appetite
Eye Problems	• Dry or red eyes • Eye pain or swelling • Vision changes	• Increased tears • Sensitivity to light • Blurred vision
Extravasation	Extravasation happens when medicine that is supposed to go into a vein leaks out into the tissues around it. This can cause pain, swelling, and damage to the skin and tissues. Carboplatin and paclitaxel may cause extravasation. • Pain, burning, or stinging at the infusion site • Swelling, redness, or blistering around the site	• Coolness or numbness in the area • Decreased blood flow or tissue damage, potentially leading to ulcers or tissue death in severe cases

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.

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Intimacy, 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.
- **Boxed Warning**: Treatment may **harm an unborn baby**.
    - If you are able to become pregnant:
        - Your care team will verify your pregnancy status before treatment.
        - Use an effective method of birth control during treatment with trastuzumab, carboplatin, and paclitaxel, for 3 to 6 months after your last dose of carboplatin, and for 7 months after your last dose of trastuzumab.
        - 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 trastuzumab, carboplatin, and paclitaxel, and for 3 to 6 months after your last dose of carboplatin.
- **Do not breastfeed** during treatment with trastuzumab, carboplatin, and paclitaxel, for 6 to 10 days after your last dose of paclitaxel, and for 7 months after your last dose of trastuzumab.

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: Trastuzumab does 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.

Additional Information

- **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.
- **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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Notes

Updated Date: October 6, 2026

Scan the QR code below to access this education sheet.

Important Notice:
The Association of Cancer Care Centers (ACCC), Hematology/Oncology Pharmacy Association (HOPA), Network for Collaborative Oncology Development & Advancement, Inc. (NCODA), and Oncology Nursing Society (ONS) have collaborated to gather information and develop this patient education guide. This guide is a summary of the medication, based on information provided by the drug manufacturer and other sources.

This guide does not cover all information available on the possible uses, directions, doses, precautions, warnings, interactions, adverse effects, or risks associated with this medication. It should not be used as a substitute for the advice of a qualified healthcare professional. The provision of this guide is for informational purposes only. It does not constitute or imply endorsement, recommendation, or favoring of this medication by ACCC, HOPA, NCODA, or ONS, who assume no liability for and cannot ensure the accuracy of the information presented. All decisions regarding this medication should be made with the guidance and direction of a qualified healthcare professional.

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