

Ribociclib + endocrine therapy · metastatic

The usual metastatic starting dose is ribociclib 600 mg once daily on Days 1–21 followed by Days 22–28 off. Continue the prescribed AI daily or fulvestrant on its own injection schedule; add ovarian suppression when indicated. Continue while beneficial and tolerated.

BASELINE → TREATMENT → FOLLOW-UP

Treatment and monitoring over time

Columns show sequence and general intervals, not equal periods or booked appointments. The team confirms who arranges each test, who reviews results and who authorises treatment or restart.

Check	Before first dose	Cycles 1-2	Cycles 3-6	Later treatment	Completion / change
Ribociclib and endocrine partner	Confirm metastatic 600 mg / AI or fulvestrant plan	Days 1-21 on; Days 22-28 off; fulvestrant loading visits if chosen	Repeat if cleared; endocrine partner continues	While beneficial and tolerated	Review endocrine continuation separately
Blood counts / renal / liver	Baseline profiles	Every two weeks in both cycles	Before each cycle	As clinically indicated; more often if abnormal	Follow abnormalities before restart or after stopping
ECG / heart rhythm	Baseline ECG; check QTcF eligibility	Repeat around cycle 1 Day 14	Further ECG when clinically indicated	Repeat for symptoms, QT change or interacting medicines	No automatic restart after a QT-related hold
Electrolytes	Potassium, calcium, magnesium and phosphorus	Before each cycle; correct abnormalities	Before each cycle through cycle 6	As clinically indicated	Review unresolved abnormalities
Bone / endocrine health	Assess AI/OFS bone and menopausal risks	Support symptoms and adherence	AI/OFS and any injections follow their own plan	Repeat bone assessment according to risk	Longer endocrine and bone plan continues
Cancer response	Baseline disease assessment	Assess new symptoms promptly	Imaging according to consultant plan	Continue response and symptom review	Progression prompts new treatment decision

THE WHOLE TREATMENT JOURNEY

Ribociclib + endocrine therapy · metastatic: treatment and checks

HR-positive / HER2-negative metastatic breast cancer

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Read from left to right. Columns show stages, not equal lengths of time. This is a general plan: no dates or personal information are needed. Your team confirms which steps apply and arranges appointments.

Treatment, tests and reviews across the course

Care / check	Before first dose	Cycles 1-2	Cycles 3-6	Later treatment	Completion / change
Ribociclib and endocrine partner NCCP 00525 · SMPC	Confirm metastatic 600 mg / AI or fulvestrant plan	Days 1–21 on; Days 22–28 off; fulvestrant loading visits if chosen	Repeat if cleared; endocrine partner continues	While beneficial and tolerated	Review endocrine continuation separately
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What each check is for

1 Before the first dose

Before first dose

Sources: [NCCP 00525](#) · [SMPC](#)

2 Early toxicity checks

Cycles 1-2

Sources: [NCCP 00525](#) · [SMPC](#)

3 Benefit, tolerability and adherence

Later treatment

Sources: [NCCP 00525](#) · [SMPC](#)

4 Completion or treatment change

Completion / change

Sources: [NCCP 00525](#)

At the next review, ask

- Which treatment phase am I in, and what happens next?
- Which test is expected next, who arranges it, and who explains the result?
- Who should I contact if an expected appointment has not arrived?

This map does not show whether a test has been ordered, booked or completed. Do not wait for a scheduled test if you develop new symptoms.