

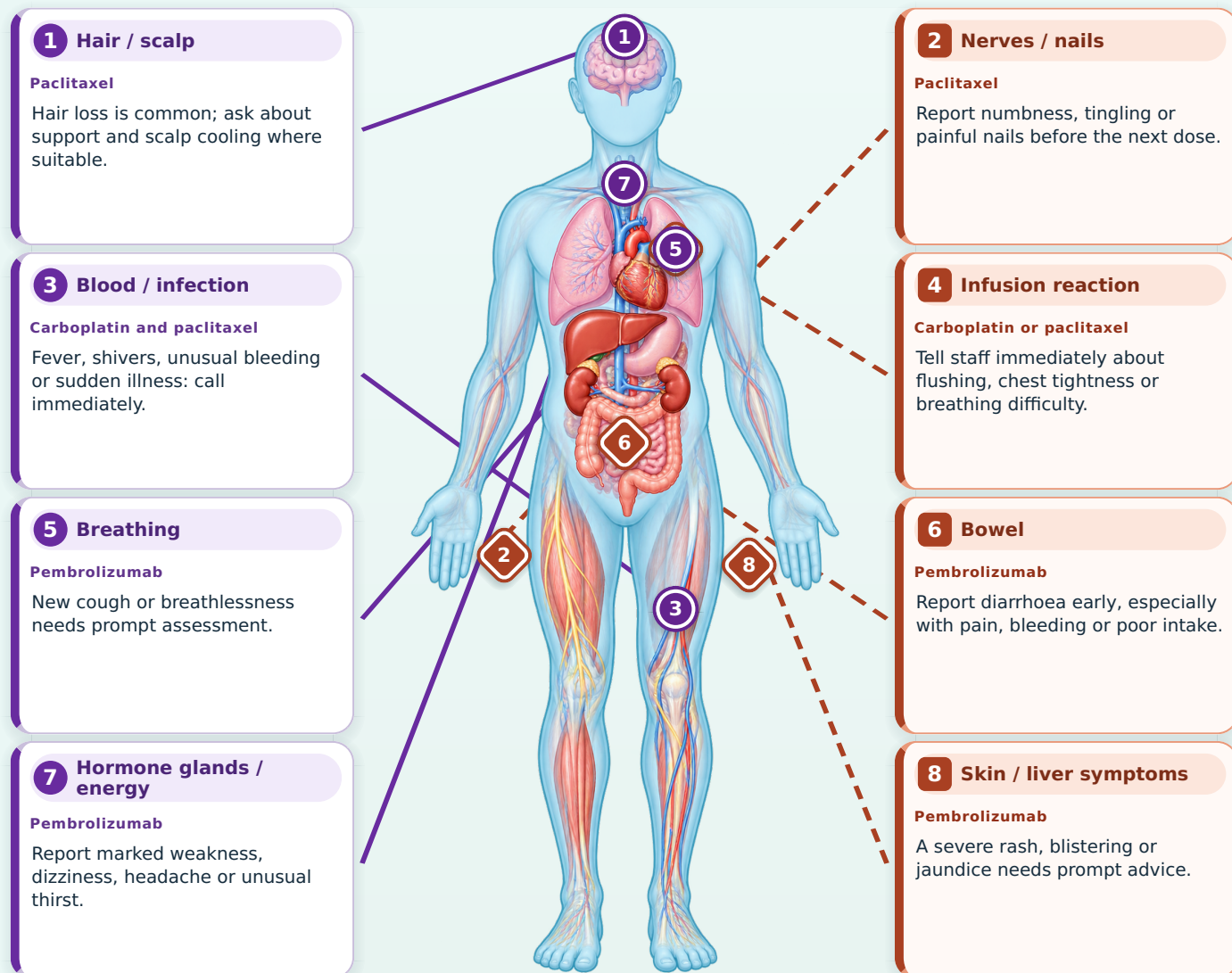
Pembrolizumab 200 mg + carboplatin AUC 5 / paclitaxel → AC

Phase 1: four 21-day cycles; paclitaxel on Days 1, 8 and 15, carboplatin on Day 1. Phase 2: four AC cycles every 21 days. Pembrolizumab 200 mg every 21 days during chemotherapy; after surgery, nine 21-day doses or five 42-day doses (400 mg). See the whole-treatment map for monitoring and sequencing.

Source reconciled; independent oncology, pharmacy and patient/PPI review pending. Selected effects; not a complete medicine leaflet.

A picture of side effects

Numbered symptom boxes connect to the anatomical illustration. The medicine responsible may be uncertain; report the symptom.



Selected effects, not every possible effect or a prediction. Blood-count, skin and line markers are schematic. Number and text carry meaning; colour is decorative.

This printed map shows phase 1. See the next page for all medicines and the online phase-specific maps. Report persistent effects after a phase ends.

Fever, shivers or suddenly unwell: contact oncology immediately. Severe chest pain, breathing difficulty, collapse or seizure: 112 / 999.

Your treatment, at home.

Important medicine-specific effects

Pembrolizumab

- Immune inflammation of bowel, lungs, liver, kidneys or skin
- Hormone-gland problems, sometimes permanent
- Rare serious heart or neurological inflammation
- Infusion reaction
- Effects can first appear after treatment ends

Carboplatin

- Low blood counts, infection and bleeding
- Nausea, vomiting and fatigue
- Allergic reaction, sometimes after previous exposure
- Kidney or electrolyte changes

Paclitaxel

- Low blood counts and infection
- Numbness / tingling, sometimes lasting
- Hair loss, muscle or joint pain
- Infusion reaction
- Mouth, bowel, skin and nail effects

Doxorubicin

- Low counts, infection and mouth ulcers
- Nausea, hair loss and fatigue
- Heart damage, sometimes delayed
- Severe tissue injury if the infusion leaks
- Rare later blood cancers

Cyclophosphamide

- Low counts and infection
- Nausea, vomiting and hair loss
- Bladder irritation / bleeding
- Fertility effects and menopause
- Rare later blood cancers

Surgery, radiation and monitoring: [open the whole-treatment map](#) or scan the QR.

Make the plan practical

Separate anti-sickness plans

The platinum/taxane phase and AC need separate prescriptions. Carboplatin Day 1 uses a high-risk plan; paclitaxel-only Days 8 and 15 use a separate low-risk plan. AC uses its own high-risk plan.

Growth-factor support

The team decides whether growth-factor support is needed for this three-weekly AC regimen.

Checks before the next dose

FBC, renal and liver tests weekly during the carboplatin/paclitaxel phase, then before every AC cycle. Continue the required blood tests before each postoperative pembrolizumab cycle. Keep the thyroid and other immune-monitoring appointments.

After chemotherapy

After surgery: pembrolizumab 200 mg every 21 days for nine doses OR 400 mg every 42 days for five doses. These are alternative schedules, not consecutive courses. Progression preventing definitive surgery or unacceptable pembrolizumab toxicity changes this plan; postoperative treatment is not automatic.

Emergency: 112 / 999. Severe breathing difficulty, collapse, seizure or severe chest pain needs emergency help.

Contact oncology immediately for temperature $\geq 37.5^{\circ}\text{C}$ or $\leq 36^{\circ}\text{C}$, shivering or suddenly feeling unwell, even with a normal temperature. Follow your own hospital's instructions. If you cannot reach the team, seek urgent medical assessment.

YOUR ONCOLOGY TEAM · DAYTIME

Insert numbers here

Acute Oncology Service

YOUR ONCOLOGY TEAM · OUT OF HOURS

Insert numbers here

Ask for medical oncology

EVENINGS / OVERNIGHT

Your out-of-hours pathway / nearest ED

Other hospitals: use the numbers your team provides.



Complete reference, visual timeline and passport

<https://sactcheck.com/patient/00857/>

Sources and review status are available online. Follow your own prescription and hospital instructions.