

Tata Memorial Hospital

**Department of Medical Oncology**

Name: Satviki Potdar Trametinib Protocol for Low Grade Glioma  
Gender/Age: Female

File No: IIF2025 | 2002

Weight: 20 kg BRAF status:

NF-1/ Non NF-1

**Duration planned:** 6 months/1 year

Dose 0.5mg

Dosing – Age  $\geq$  6 years: 0.025 mg/kg once daily (max 2 mg)

Age < 6 years: 0.032 mg/kg once daily (max 2 mg)

(Available in 0.5 mg and 2 mg tablet strength)

Administration – Once daily dosing on empty stomach: 1 hour before or 2 hours after meals

#### **Skin rash prophylaxis:**

1. Use broad-spectrum sunscreen (with SPF >15) at least twice daily.
  2. Use alcohol-free, glycerine containing emollient cream on dry areas at least twice daily.
  3. Use topical steroid (mometasone 0.1% or hydrocortisone 1%) cream to face, chest and back for at least a duration of 6 weeks from initiation of therapy.

Do CBC/LFT/RFT once in every 4 weeks

DATE / TIME	CLINICAL NOTES AND MANAGEMENT PLAN (For Clinician's Use only)	FOCUS NO. (For Nurse's Use only)
20/7/25		
	Epicenter - Hypothalamus M <sub>1</sub> → medial Temporal lobe / suprasellar - Caudate nucleus.  BRAFFMAN'S (Outcome). → TH → NS (AD).	Path - tools infib. - Diffuse - Not  In ryo      prolactin Differ glomer /pediatric / MAPK altered
		→ Assess for systemic Rx (?methyl) → Check Mudgersonne deposit.
30/7/25	Urgent Dr. Girish Patil (Diu Dr. Girish Sir) Case of Lt. Ganglion capsular. E Perisylvian Astrocyt Infiltrating tumor. Also discussed in INOM there is stable disease from Post op to Recent Scans E plan way to consider MRI Plan - To start Methyl To meet Dr. Mavarma	
		11/8 2025

**CLINICAL NOTES AND MANAGEMENT PLAN**  
(For Clinician's Use only)**FOCUS NOTES**  
(For Nurse's Use only)30/7/25

- To start on T. Megsel 0.5m  
once daily

- To do CBC

LFT/RFT/LG

Gbs prior to starting

- To take stain care measure

- Labs every 4 weeks

- MRI after 6 months

- Meet Mew for funding

- Continue physio / <sup>OT</sup>  
occupational