

Allogeneic Regimen Chart

MRD/MUD ABLATIVE REGIMENS						
Smart Phrase	Protocol Name	Donor	Chemo Regimen	GVHD prophylaxis	Admit Day	Notes
BMTMACFLUBUMRD	Busulfan/Fludarabine	MRD	Busulfan per PK- guided dosing (preferred) days -5, -4, -3, -2 (target AUC of 4800) Fludarabine 40mg/m2 days -5, -4, 3, -2	Tacrolimus MTX 15 mg/m2 day +1 MTX 10mg/m2 days +3, +6	-6	- test dose Busulfan recommended - must admit on M,T,or W to start busulfan on T,W, or R
BMTMACFLUBUMUD		MUD	Busulfan per PK-guided dosing d-5, -4, -3, -2 (target AUC of 4800) Fludarabine 40mg/m2 days -5, -4, -3, -2	Tacrolimus MTX 15 mg/m2 day +1 MTX 10mg/m2 d+3, +6, +11	-6	- test dose Busulfan recommended - must admit on M,T,or W to start busulfan on T,W, or R *ATG may be added per attending discretion. If ATG used, please follow the admit date and conditioning schedule for MMUD
Reference: Alatrash G, de Lima M et al. <i>BBMT</i> 2011;17(10):1490-1496						
BMTMACBUCY	Busulfan/Cyclophosphamide	MRD	Busulfan per PK-guided dosing days -7, -6, -5, -4(target AUC of 4800) Cyclophosphamide 60mg/kg days -3, -2 Mesna days -3, -2	Tacrolimus MTX 15 mg/m2 day +1 MTX 10mg/m2 days +3, +6	-8	- test dose Busulfan recommended - must admit on M,T,or W to start busulfan on T,W, or R
		MUD	Busulfan per PK-guided dosing days -7, -6, -5, -4 (target AUC of 4800) Cyclophosphamide 60mg/kg days -3, -2 Mesna days -3,-2	Tacrolimus MTX 15 mg/m2 days+1 MTX 10mg/m2 days +3, +6, +11	-8	- test dose Busulfan recommended - must admit on M,T,or W to start busulfan on T,W, or R *ATG may be added per attending discretion as follows: ATG (rabbit) 0.5 mg/kg d-3, 1.5 mg/kg d-2, 2.5 mg/kg d-1 (total dose 4.5 mg/kg)
Reference: Andersson BS, <i>BBMT</i> 2008;14:672-684						
BMTMACTBICY	Cyclophosphamide/TBI	MRD	TBI 200 cGy BID days -6, -5, -4 Cyclophosphamide 60mg/kg days -3, -2 Mesna days -3, -2	Tacrolimus MTX 15 mg/m2 days +1 MTX 10mg/m2 days +3, +6	-7	Palifermin 60 mcg/kg/day IV to be given for 3 daily doses prior to start of TBI/conditioning, with 24 hours between last dose of palifermin and first dose of TBI. Palifermin to be repeated x 3 doses on days 0, +1, and +2 after stem cell infusion complete.

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		MUD	TBI 200 cGy BID days -6, -5, -4 Cyclophosphamide 60mg/kg days -3, -2 Mesna days -3, -2	Tacrolimus MTX 15 mg/m ² day+1 MTX 10mg/m ² days +3, +6, +11	-7	Palifermin 60 mcg/kg/day IV to be given for 3 daily doses prior to start of TBI/conditioning, with 24 hours between last dose of palifermin and first dose of TBI. Repeat x 3 doses on days 0, +1, and +2 after stem cell infusion complete. *ATG may be added per attending discretion as follows: ATG (rabbit) 0.5 mg/kg d-3, 1.5 mg/kg d-2, 2.5 mg/kg d-1 (total dose 4.5 mg/kg)
Reference: Dhedin N et al. <i>Blood</i> 2015;125(16):2486-2496						
MISMATCHED ABLATIVE REGIMENS						
Smart Phrase	Protocol Name	Donor	Chemo Regimen	GVHD prophylaxis	Admit Day	Notes
BMTMACFLUBUMUD	Busulfan/Fludarabine	MMUD MMRD	Busulfan per PK-guided dosing d6, -5, -4, -3 (target AUC of 4800) Fludarabine 40mg/m ² days -6, -5, -4, -3	Tacrolimus MTX 15 mg/m ² day +1 MTX 10mg/m ² d+3, +6, +11 ATG (rabbit) 0.5 mg/kg d-3, 1.5 mg/kg d-2, 2.5 mg/kg d-1 (total dose 4.5 mg/kg)	-7	- test dose Busulfan recommended - must admit on M,T,or W to start busulfan on T,W, or R
Reference: Alatrash G, de Lima M et al. <i>BBMT</i> 2011;17(10):1490-1496						
BMTMACBUCY	Busulfan/Cyclophosphamide	MMUD MMRD	Busulfan per PK-guided dosing days -7, -6, -5, -4 (target AUC of 4800) Cyclophosphamide 60mg/kg days -3, -2 Mesna days -3,-2	Tacrolimus MTX 15 mg/m ² days+1 MTX 10mg/m ² days +3, +6, +11 ATG (rabbit) 0.5 mg/kg d-3, 1.5 mg/kg d-2, 2.5 mg/kg d-1 (total dose 4.5 mg/kg)	-8	- test dose Busulfan recommended - must admit on M,T,or W to start busulfan on T,W, or R
Reference: Andersson BS, <i>BBMT</i> 2008;14:672-684						
BMTMACTBICY	Cyclophosphamide/TBI	MMUD MMRD	TBI 200 cGy BID days -6, -5, -4 Cyclophosphamide 60mg/kg days -3, -2 Mesna days -3, -2	Tacrolimus MTX 15 mg/m ² day+1 MTX 10mg/m ² days +3, +6, +11 ATG (rabbit) 0.5 mg/kg d-3, 1.5 mg/kg d-2, 2.5 mg/kg d-1 (total dose 4.5 mg/kg)	-7	Palifermin 60 mcg/kg/day IV to be given for 3 daily doses prior to start of TBI/conditioning, with 24 hours between last dose of palifermin and first dose of TBI. Repeat x 3 doses on days 0, +1, and +2 after stem cell infusion complete.
Reference: Dhedin N et al. <i>Blood</i> 2015;125(16):2486-2496						

Allogeneic Regimen Chart

MRD/MUD REDUCED INTENSITY REGIMENS						
Smart Phrase	Protocol Name	Donor	Chemo Regimen	GVHD prophylaxis	Admit Day	Notes
BMTRICFLUMEL	Fludarabine/Melphalan	MRD	Fludarabine 30mg/m2 days -5,-4,-3,-2 Melphalan 140 mg/m2 day -1	Tacrolimus MTX 5mg/m2 days +1, +3, +6	-5	
		MUD	Fludarabine 30mg/m2 days -5,-4,-3,-2 Melphalan 140 mg/m2 day -1	Tacrolimus MTX 5mg/m2 days +1, +3, +6, +11	-5	
Reference: Dasgupta RK et al. <i>BMT</i> 2006;37:455-461						
BMTRICFLUBU	Fludarabine/Busulfan	MRD	Fludarabine 30mg/m2 days -6, -5, -4, -3, -2 Busulfan 3.2 mg/kg days -5, -4	Tacrolimus MTX 5mg/m2 days +1, +3, +6	-6	
		MUD	Fludarabine 30mg/m2 days -6, -5, -4, -3, -2 Busulfan 3.2 mg/kg days -5, -4	Tacrolimus MTX 5mg/m2 days +1, +3, +6, +11	-6	
Reference: Kroger N et al. <i>Ann Hematol</i> 2003;82:336-342						

MISMATCHED REDUCED INTENSITY REGIMENS						
Smart Phrase	Protocol Name	Donor	Chemo Regimen	GVHD prophylaxis	Admit Day	Notes
BMTRICFLUMEL	Fludarabine/Melphalan	MMUD MMRD	Fludarabine 30 mg/m2 days -5, -4, -3, -2 Melphalan 140 mg/m2 day -1	Tacrolimus MTX 5mg/m2 days +1, +3, +6, +11 ATG (rabbit) 0.5 mg/kg d-3, 1.5 mg/kg d-2, 2.5 mg/kg d-1 (total dose 4.5 mg/kg)	-5	
Reference: Dasgupta RK et al. <i>BMT</i> 2006;37:455-461						
BMTRICFLUBU	Fludarabine/Busulfan	MMUD MMRD	Fludarabine 30mg/m2 days -6, -5, -4, -3, -2 Busulfan 3.2 mg/kg d-5, -4	Tacrolimus MTX 5mg/m2 days +1, +3, +6, +11 ATG (rabbit) 0.5 mg/kg d-3, 1.5 mg/kg d-2, 2.5 mg/kg d-1 (total dose 4.5 mg/kg)	-6	
Reference: Kroger N et al. <i>Ann Hematol</i> 2003;82:336-342						

Allogeneic Regimen Chart

MRD/MUD NON-MYELOABLATIVE REGIMENS						
Smart Phrase	Protocol Name	Donor	Chemo Regimen	GVHD prophylaxis	Admit Day	Notes
BMTNMAFLUCYTBI	Fludarabine/Cyclophosphamide/TBI	MRD	Fludarabine 25 mg/m2 days -6, -5, -4, -3, -2 Cyclophosphamide 50 mg/kg day -6 Mesna 50 mg/kg day -6 TBI 200 cGy day -1	Tacrolimus MTX 5 mg/m2 days +1, +3, +6,	-6	
		MUD	Fludarabine 25 mg/m2 days -6, -5, -4, -3, -2 Cyclophosphamide 50 mg/kg day -6 Mesna 50 mg/kg day -6 TBI 200 cGy day -1	Tacrolimus MTX 5 mg/m2 days +1, +3, +6,+11	-6	
Reference: Mussetti A, Devlin SM, Casto-Malaspina HR, et al. <i>BMT</i> 2015;50:1293-1298						
BMTNMAFLUCY	Fludarabine/Cyclophosphamide	MRD	Fludarabine 25 mg/m2 days -5, -4, -3, -2, -1 Cyclophosphamide 50 mg/kg days -5, -4 Mesna 50 mg/kg days -5, -4	Tacrolimus MTX 5 mg/m2 days +1, +3, +6	-5	
		MUD	Fludarabine 25 mg/m2 days -5, -4, -3, -2, -1 Cyclophosphamide 50 mg/kg days -5, -4 Mesna 50 mg/kg days -5, -4	Tacrolimus MTX 5 mg/m2 days +1,+3, +6, +11	-5	
Reference: Paplham P, Hahn T, Dubel K, et al. <i>Leuk Res Rep</i> 2014;3(1):28-31						
BMTNMAFCR	Fludarabine/Cyclophosphamide/ Rituximab (FCR)	MRD	Rituximab 375 mg/m2 day -13 Rituximab 1000 mg/m2 days -6, +1, +8 Fludarabine 30 mg/m2 days -5, -4, -3 Cyclophosphamide 750 mg/m2 days -5, -4, 3 Mesna 750 mg/m2 days -5, -4, -3	Tacrolimus MTX 5 mg/m2 days +1, +3, +6	-6	Day -13 Rituximab to be administered as outpatient
		MUD	Rituximab 375 mg/m2 day -13 Rituximab 1000 mg/m2 days -6, +1, +8 Fludarabine 30 mg/m2 days -5, -4, -3 Cyclophosphamide 750 mg/m2 days -5, -4, 3 Mesna 750 mg/m2 days -5, -4, -3	Tacrolimus MTX 5 mg/m2 days +1, +3, +6, +11	-6	Day -13 Rituximab to be administered as outpatient
Reference: Laport GG, Wu J, Logan B, et al. <i>BBMT</i> 2016;22(8):1440-1448						

Allogeneic Regimen Chart

	Fludarabine/Bendamustine/ Rituximab (FBR)	MRD	Rituximab 375 mg/m2 day -13 Rituximab 1000 mg/m2 days -6, +1, +8 Fludarabine 30 mg/m2 days -5, -4, -3 Bendamustine 130 mg/m2 days -5, -4, -3	Tacrolimus MTX 5 mg/m2 days +1, +3, +6	-5	Days -13 and -6 Rituximab to be administered as outpatient. Infusion appts should be early in the day
		MUD	Rituximab 375 mg/m2 day -13 Rituximab 1000 mg/m2 days -6, +1, +8 Fludarabine 30 mg/m2 days -5, -4, -3 Bendamustine 130 mg/m2 days -5, -4, -3	Tacrolimus MTX 5 mg/m2 days +1, +3, +6, +11 ATG 1 mg/kg days -2, -1	-5	Days -13 and -6 Rituximab to be administered as outpatient. Infusion appts should be early in the day
Reference: Khouri IF, Sui D, Jabbour EJ, et al. Bone Marrow Transplant 2017;52:28-33						

MISMATCHED NON-MYELOABLATIVE REGIMENS						
Smart Phrase	Protocol Name	Donor	Chemo Regimen	GVHD prophylaxis	Admit Day	Notes
BMTNMAFLUCYTBI	Fludarabine/Cyclophosphamide/TBI	MMUD MMRD	Fludarabine 25 mg/m2 days -6, -5, -4, -3, -2 Cyclophosphamide 50 mg/kg day -6 Mesna 50 mg/kg day -6 TBI 200 cGy day -1	Tacrolimus MTX 5 mg/m2 days +1, +3, +6,+11 ATG (rabbit) 0.5 mg/kg d-3, 1.5 mg/kg d-2, 2.5 mg/kg d-1 (total dose 4.5 mg/kg)	-6	
Reference: Mussetti A, Devlin SM, Casto-Malaspina HR, et al. <i>BMT</i> 2015;50:1293-1298						
BMTNMAFLUCY	Fludarabine/Cyclophosphamide	MMUD MMRD	Fludarabine 25 mg/m2 days -5, -4, -3, -2, -1 Cyclophosphamide 50 mg/kg days -5, -4 Mesna 50 mg/kg days -5, -4	Tacrolimus MTX 5 mg/m2 days +1,+3, +6, +11 ATG (rabbit) 0.5 mg/kg d-3, 1.5 mg/kg d-2, 2.5 mg/kg d-1 (total dose 4.5 mg/kg)	-5	
Reference: Papham P, Hahn T, Dubel K, et al. <i>Leuk Res Rep</i> 2014;3(1):28-31						
BMTNMAFCR	Fludarabine/Cyclophosphamide/ Rituximab (FCR)	MMUD MMRD	Rituximab 375 mg/m2 day -13 Rituximab 1000 mg/m2 days -6, +1, +8 Fludarabine 30 mg/m2 days -5, -4, -3 Cyclophosphamide 750 mg/m2 days -5, -4, -3 Mesna 750 mg/m2 days -5, -4, -3	Tacrolimus MTX 5 mg/m2 days +1, +3, +6, +11 ATG (rabbit) 0.5 mg/kg d-3, 1.5 mg/kg d-2, 2.5 mg/kg d-1 (total dose 4.5 mg/kg)	-6	Day -13 Rituximab to be administered as outpatient
Reference: Laport GG, Wu J, Logan B, et. al. <i>BBMT</i> 2016; 22(8): 1440-1448						

Allogeneic Regimen Chart

MAC HAPLOIDENTICAL/MISMATCHED TRANSPLANT REGIMENS						
Smart Phrase	Protocol Name	Donor	Chemo Regimen	GVHD prophylaxis	Admit Day	Notes
BMTHAPFLUTBI	Fludarabine/TBI (TBI-based MAC Haplo)	Haplo	Fludarabine 30 mg/m ² days -7, -6, -5 TBI 150cGy BID days -4, -3, -2, -1	Tacrolimus day +5 to +180 Mycophenolate 15mg/kg TID (max dose 3g/day) day +5 to +35 Cyclophosphamide 50 mg/kg days +3, +4 Mesna days +3,+4	-7	NO STEROIDS UNTIL 24 HOURS AFTER POST TRANSPLANT CYCLOPHOSPHAMIDE Consider Palifermin 60 mcg/kg/day IV to be given for 3 daily doses prior to start of conditioning chemotherapy, with 24 hours between last dose of palifermin and first dose of chemotherapy. Repeat x 3 doses on days 0, +1, and +2 after stem cell infusion complete.
Reference: Solomon SR et al. <i>BMT</i> 2015;21(7):1299-307						
BMTHAPBUFLUCY	Busulfan/Fludarabine/Cyclophosphamide (NSH-864; non-TBI-based MAC Haplo)	Haplo	Busulfan per PK-guided dosing (preferred) days -7, -6, -5, -4 (target AUC 4800) Fludarabine 25 mg/m ² days -6, -5, -4, -3, -2 Cyclophosphamide 14.5 mg/kg days -3, -2	Tacrolimus day +5 to +180 Mycophenolate 15 mg/kg TID (max dose 3g/day) day +5 to +35 Cyclophosphamide 50 mg/kg days +3, +4 Mesna days +3, +4	-8	- test dose Busulfan recommended - must admit on M,T, or W to start busulfan on T,W, or R NO STEROIDS UNTIL 24 HOURS AFTER POST TRANSPLANT CYCLOPHOSPHAMIDE
Reference: Bashey A, et al. <i>BMT</i> 2014;49(8):999-1088						

NMA HAPLOIDENTICAL/MISMATCHED TRANSPLANT REGIMENS						
Smart Phrase	Protocol Name	Donor	Chemo Regimen	GVHD prophylaxis	Admit Day	Notes
BMTHAPFLUATGCYBTBI	Fludarabine/ATG/Cyclophosphamide/TBI (NMA Haplo)	Haplo	Fludarabine 30 mg/m ² days -6, -5, -4, -3 ATG (rabbit) 2.5 mg/kg days -5, -4, -3 Cyclophosphamide 50mg/kg day -2 Mesna days -2 TBI 300 cGy day -1	Tacrolimus starts day -3 Mycophenolate 20-30 mg/kg/d (max dose 3g/day) day +1 to +28	-6	Protocol used IV cyclosporine instead of tacrolimus for GVHD prophylaxis starting on day -1. Will use oral tacrolimus starting on day -3 to get therapeutic before stem cell infusion.
Reference: Tang BL et al. <i>BMT</i> 2014;50(2):248-52						

Allogeneic Regimen Chart

BMTHAPFLUCYTBI	Fludarabine/Cyclophosphamide/TBI (NMA Haplo)	Haplo	Fludarabine 30 mg/m ² days -6, -5, -4, -3, -2 Cyclophosphamide 14.5mg/kg days -6, -5 TBI 200 cGy day -1	Tacrolimus starts d+5; starting dose 1 mg PO BID and adjusted for goal of 515 Mycophenolate 15mg/kg PO TID (max dose 3 grams/day) day +5 to day +35 Cyclophosphamide 50mg/kg IV days +3, +4 Mesna days +3, +4, +5	-6	NO STEROIDS UNTIL 24 HOURS AFTER POST TRANSPLANT CYCLOPHOSPHAMIDE
Reference: McCurdy, et al. <i>Blood</i> 2015;125(19):3024-3031						
BMTHAPFLUMELTBI	Fludarabine/Melphalan/TBI (NMA Haplo)	Haplo	Fludarabine 40 mg/m ² days -5, -4, -3, -2 Melphalan 100 mg/m ² on day -5 TBI 200 cGy day -1	Tacrolimus starts d+5; starting dose 1 mg PO BID and adjusted for goal of 510 Mycophenolate 15mg/kg PO TID (max dose 3 grams/day) day +5 to day +100 Cyclophosphamide 50mg/kg IV days +3, +4 Mesna days +3, +4, +5	-5	NO STEROIDS UNTIL 24 HOURS AFTER POST TRANSPLANT CYCLOPHOSPHAMIDE
Reference: Ciurea SO, et al. <i>BBMT</i> 2018;24:1232-1236						

CORD BLOOD REGIMENS

Smart Phrase	Protocol Name	Donor	Chemo Regimen	GVHD prophylaxis	Admit Day	Notes
BMTMACUCB	Fludarabine/Cyclophosphamide/TBI (MAC Cord)	dUCB	Fludarabine 25 mg/m ² days -8, -7, -6 Cyclophosphamide 60 mg/kg days -7, -6 TBI 165 cGy BID days -4, -3, -2, -1	Tacrolimus Mycophenolate 1000 mg PO BID days -3 to +30	-8	Rest day on day -5 Filgrastim to start on day +1 Palifermin 60 mcg/kg/day IV to be given for 3 daily doses prior to start of conditioning chemotherapy, with 24 hours between last dose of palifermin and first dose of chemotherapy. Repeat x 3 doses on days 0, +1, and +2 after stem cell infusion complete.
Reference: Barker JN, Weisdorf DJ, DeFor TE, et al. <i>Blood</i> 2005;105:1343-1347						

Allogeneic Regimen Chart

BMTNMAUCB	Fludarabine/Cyclophosphamide/TBI (NMA Cord)	dUCB	Fludarabine 40 mg/m ² days -6, -5, -4, -3, -2 Cyclophosphamide 50 mg/kg day -6 Mesna 50 mg/kg day -6 TBI 200 cGy day -1	Tacrolimus Mycophenolate 1000mg PO BID Days -3 to +30	-6	Consider 20% fludarabine dose reduction in pts with measured CrCl < 70 mL/min/1.73 m ² , prior CNS disease, brain radiation, or prior IT therapy.
Reference: Brunstein CG, Barker JN, Weisdorf DJ et al. <i>Blood</i> 2007;110:3064-3070						

APLASTIC ANEMIA REGIMENS						
Smart Phrase	Protocol Name	Donor	Chemo Regimen	GVHD prophylaxis	Admit Day	Notes
BMTAAFLUCYATG	Flu-Cy-rabbit ATG (Aplastic Anemia)	MUD MMUD MMRD	Cyclophosphamide 50mg/kg days -9, -8, -7, -6 Mesna 50mg/kg days -9, -8, -7, -6 Fludarabine 30 mg/m ² days -5, -4, -3, -2 ATG (rabbit) 2.5mg/kg days -3, -2, -1	Tacrolimus MTX 5mg/m ² days +1, +3, +6, +11	-9	
Reference: Kang HJ et al. <i>BBMT</i> 2010;16:1582-88						
BMTAACATG	Cy-horse ATG (Aplastic Anemia)	MRD	Cyclophosphamide 50mg/kg days -5, -4, -3, -2 Mesna 20mg/kg days -5, -4, -3, -2 (pre, 4 hrs, and 8 hrs after cyclophosphamide doses) ATG (horse) 30 mg/kg days -4, -3, -2	Tacrolimus MTX 15 mg/m ² day +1 MTX 10mg/m ² days +3, +6, +11	-5	
Reference: Storb R, Etzioni R, Anasetti C et al. <i>Blood</i> 1994;84(3):941-9						
BMTAAFLUCYBTIATG	ATG-Flu-Cy-TBI (Aplastic Anemia)	MUD MMUD MMRD HAPLO	ATG (rabbit) 0.5mg/kg on day -9 and rATG 2 mg/kg on day -8 and -7. Fludarabine 30 mg/m ² on days -6, -5, -4, -3, -2 Cyclophosphamide 14.5mg/kg days -6, -5 Single dose TBI 200 cGy on day -1	Tacrolimus starts d+5; starting dose 1 mg PO BID and adjusted for goal of 5-15 Mycophenolate 15mg/kg PO TID (max dose 3 grams/day) day +5 to day +35 Cyclophosphamide 50mg/kg IV days +3, +4 Mesna days +3, +4, +5	-9	Tacrolimus was continued for 1 year.
Reference: DeZern AE, et al. <i>BBMT</i> 2017;23:498-504						