COURSE TITLE: ADVANCED MEDICAL SURGICAL NURSING

COURSE CODE: NSC 408

MATRIC NUMBER: 17/MHS02/101

ANSWERS

Neoadjuvant or pre-operative or upfront therapy: refers to giving drug treatment to a patient with breast cancer before surgery is performed in a newly diagnosed cancer patient. It is done to shrink the tumor and make the surgery easy to do. The drugs given here is the same as those given after the surgery (adjuvant) but the sequence is flipped here.

My nursing responsibilities will include;

* Being involved in decision making process along with the cancer patient
* Discussing chemotherapy with patient at different points following diagnosis and during treatment
* Making an extensive assessment of the patient and taking note of reactions and allergies to certain medications
* Monitor the patients lab results, blood and blood product administration
* Teach patient and family members regarding side effects such as; fatigue, immunosuppression and also educate on precautionary methods
* Educate the patient on necessary information about the therapy and provide the patient with all the answers needed to clear their doubts
* Taking informed consent and also confirm given consent before proceeding with any treatment
* Implementing the agreed plan
* Adjusting the treatment as it progresses
* Reviewing the patient to determine toxicities experienced previously, assess individuals fitness to continue and to also implement and planned changes in the treatment pathway
* Being competent enough to be able to manage toxicities and side effects
* The vital role of providing support for the patient and the family members

NURSING MANAGEMNT IN RADIATION THERAPY

My primary nursesing responsibilities for patients undergoing radiation therapy include;

**Teaching and Education**: nursing teaching is pivotal in patient outcome. It is important for nurses to be involved in education from the beginning of the treatment and to include the patient, caregiver and family members. This is necessary as it allows patients to be active participants in their care, it reduces anxiety and fear from misinformation and it gets the patients better prepared for the treatment. This should include; the treatment plan, address any myths and misconceptions, information about actual treatment, an explanation of the simulation process, expected outcome, specific side effects of treatment.

**Assess the patient throughout the treatment:** the nurse must assess the nutritional status and the patient’s general well-being throughout the course of treatment. Since the patient will be immunocompromised, care will be taken in order to prevent infection.

**Managing any form of radiation toxicities and side effects**: it is important that nurses collaborate with other health providers in planning for management of possible toxicities and side effects of the radiation therapy.

The nurse should also encourage rest periods as needed during the courase of the therapy to combat the anticipated side effect of fatigue.

The patient should be provided with nutritional counseling so as to minimize weight loss.

PRECAUTIONS IN CHEMOTHERAPY

**Management of hazardous drug**: this is achieved by following institutional policies and guidelines on the use of PPE (personal protective equipments)

**Chemotherapy administration and management**: the nurse should closely observe the patient during its administration because of the risk and consequences of extravasation, particularly if vesicant agent is administered.

**Hypersensitivity reactions**: Local reactions and problems should be brought to the attention of the physician so that corrective measures can be taken promptly

**Patient and family education**: Nurses have the responsibility to educate patients and family members including the caregivers on the precautionary measures to take to avoid being exposed to the drugs and also to watch for any possible reactions which should be reported immediately.

**Safe drug handling and disposal of chemotherapeutic agents**: Emergency spill kits should be readily available in any treatment area where chemotherapy is being prepared and administered so as to manage accidentally spillage or exposure of the hazardous drugs. Precautions should also be taken when handling any body fluids or excreta from the patient because many agents are excreted unaltered in urine and feces.

**Documentation methods (extravasation record):** this entails full detail of the procedure as carried out by the care giver and it should includes information on any occurrence of extravasation and methods implemented to relieve its effect

Coordination of home care

Limiting the visiting hours in order to reduce the exposure to harmful substances