1.)Discuss your nursing responsibilities towards a patient schedulled to  receive  neoadjuvant  treatment for the management of cancer..

ANSWERS

1. Patient Assessment :The nurse reviews the treatment plan with the oncologist, is aware of expected outcomes and possible complications, and independently assesses the patient's general physical and emotional status. It is essential that a detailed nursing history and physical examination be completed. Assessment of the patient's understanding of the disease and proposed treatment is fundamental in allaying anxiety and formulating a care plan. Thorough patient preparation improves compliance with treatment programs and may impact treatment outcomes as well.

2. Patient Education :

Appropriate written and visual teaching aids may be used, as well as referrals to other professionals or community programs, such as cancer support groups. Such education includes structured and unstructured experiences to assist patients with coping with their diagnosis, long-term adjustments, and symptoms; to gain information about prevention, diagnosis and care; and to develop skills, knowledge, and attitudes to maintain or regain health status. This planned education uses a combination of methods that best meet the needs, capabilities, and learning style of the patient.

3. Symptom Management:

Nurses are challenged on a daily basis to deal with the numerous symptoms patients with cancer and their families encounter as a result of their cancer or its treatment. Nurses triage patient problems and assist in the evaluation of symptoms and initiation of interventions. For example, subjective and objective data, including information about the last chemotherapy treatment and knowledge of the patient's history, guide the nurse in determining the patient's disposition and treatment. Much progress has been made in managing the side effects of chemotherapy, and nurses have contributed significantly to this success. For example, nausea and vomiting are two of the most common symptoms associated with chemotherapy. Control of these symptoms has been a nursing research priority.

2. Discuss your  responsibilites towards a patient receiving radiotherapy on  an oncology unit where your practice.

Answers

• Monitor for adverse effects: skin changes, such as blanching, erythema, desquamation, sloughing, or hemorrhage; ulcera- tions of mucous membranes; nausea and vomiting, diarrhea, or gastrointestinal bleeding.

• Assess lungs for rales, which may indicate interstitial exudate. Observe for any dyspnea or changes in respiratory pattern.

• Identify and record any medications that the client will be taking during the radiation treatment.

• Monitor white blood cell counts and platelet counts for signifi- cant decreases

• Place the client in a private room.

• Limit visits to 10 to 30 minutes, and have visitors sit at least

6 feet from the client.

• Monitor for side effects such as burning sensations, excessive

perspiration, chills and fever, nausea and vomiting, or diarrhea.

• Assess for fistulas or necrosis of adjacent tissues.

3.What precautions should you take while caring for a patient receiving chemotherapy on your unit.

Answers

The best practice is to minimize your exposure to hazardous drugs and their metabolite.

When a patient has just received chemotherapy or forty-eight hours after the completion of the medication, one should wear personal protection equipment (PPE), to prevent accidental exposure to hazardous drugs and its metabolites.

The safety equipment includes approved gowns, gloves, goggles, and face shield. At our health system it is available on the unit or can be obtained from the central supply area.

This should be done prior to starting a treatment. The patient will secrete the hazardous drug metabolite within sputum, tears, semen, vaginal secretions, urine and stool for an average of forty-eight hours after the therapy is complete.

If the bed needs to be changed a gown should be worn, along with gloves. The linen can be put in the linen bag. If the patient is incontinent and wearing a diaper, it should be placed in a plastic bag prior to placing into the yellow chemotherapy waste container.

When handling urine, remember to wear goggles, gloves and gown, along with a face shield because of the risk of splashing.