

ABDUL AMINU LILIAN

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NSC408

ASSIGNMENT

- 1). Discuss your nursing responsibilities towards a patient schedule to receive neoadjuvant treatment for the management of cancer
- 2). Discuss your responsibilities towards a patient receiving radiotherapy on an oncology unit where your practice
- 3). What precautions should you take while caring for a patient receiving chemotherapy on your unit

ANSWER

Neoadjuvant is a treatment given as a first step to shrink a tumor before the main treatment, which is usually surgery, is given. Examples of neoadjuvant therapy include chemotherapy, radiation therapy, and hormone therapy. It is a type of induction therapy. Most often, neoadjuvant and adjuvant therapies are recommended when a patient with early-stage cancer undergoes surgery or radiation therapy and the oncologist believes he or she may benefit from additional systemic treatments or treatments that affect the entire body.

Nursing responsibilities towards a patient schedule to receive neoadjuvant treatment for the management of cancer focuses on patient assessment, patient education, and coordination of care, direct patient care, symptom management, and supportive care.

NURSING RESPONSIBILITIES INCLUDES

Patient assessment,

1. Confirm allergies, and evaluate any preexisting symptoms.
2. Verify signed consent for treatment was obtained and signed by provider and patient.
3. Monitor laboratory values and verify laboratory values within acceptable range for dosing.
4. Take measures to prevent medication errors:
 5. Perform independent double-check of original orders with a second neoadjuvant certified RN.
 6. Double check for accuracy of treatment regimen, dose, calculations of body surface area, schedule, and route of administration.
7. Recalculate chemotherapy doses independently for accuracy.
8. Verify appropriate pre-medication and pre-hydration orders.
9. Ensure patient education completed and address outstanding patient questions.

- **ADMINISTRATION**

Dual nurse verification and sign off at the bedside:

Compare original order to dispensed drug label at the bedside with another certified RN and verify patient identity

- Safe handling of hazardous medications; reduce exposure to self and others.

Intravenous line management: insertion, evaluation, and assessment.

Check patency of IV site for brisk blood return immediately prior to connecting hazardous agent to the patient and as indicated during infusion.

- Continuous monitoring for infiltration, phlebitis, extravasation, or infection.

Continuous patient monitoring for acute/adverse drug effects and allergic reactions.

Prompt recognition and management of hypersensitivity reactions.

Safe handling and management of any spills.

- **After Administration**

Flush IV line, ensure brisk blood return prior to removing peripheral IV device, flush/maintain vascular access device according to institution policy.

- **Safe handling and disposal of hazardous waste according to institution policy.**

Document in medical record the medications given, patient education, and patient response, including any adverse events.

Ensure patient has appropriate discharge instructions, anti-nausea medications, and education, and emergency contact information of physician's office in event of emergency.

2).NURSING RESPONSIBILITIES DURING RADIATION THERAPY

1. Provide education

- Many manifestations of radiation therapy do not develop until approximately 10-14days. And some do not subside until several weeks after treatments.

- The nurse explains the procedure, delivery of radiation, describe the equipment, the duration and the possible need of immobilizing the patient

2. Minimize side effects

- In women of child bear age, Rt may cause prolonged or permanent infertility

- In prostate radiotherapy, when radioactive seeds have been implanted there is low, weakly penetrating radiation for others therefore the client should use a condom for sexual intercourse in the first few weeks after the procedure.

- When a patient has a radioactive implant in place , nurses and the health care personnel need to protect themselves as well as the patient from the effects of radiation.

3. Provide a non stressful | environment

- Some people who receive radiation to the head and neck experience redness and irritation in the mouth, dry mouth and difficulty in swallowing, change in taste or nausea.

Other possible side effects include a loss of taste, earaches and swelling

Skin texture might change and jaws may feel stiff

4. Dental care

- If you wear dentures, they may no longer fit well because of swollen gums. If your dentures can cause gum sores, you may need to stop wearing them until your radiation therapy is over because sores can become infected.

- Clean teeth and gums thoroughly with a very soft tooth brush after every meal at least once a day

- Use fluoride toothpaste that contains no abrasives.

- Use wax dental tape to gently floss between the teeth. Rinse your mouth well with cool water or baking soda solution after brushing. Use 1 tsp. baking soda in 1 quart of water.

- Apply fluoride regularly as prescribed by your dentist .

5. Many patients feel tired due to the radiation therapy which can affect their emotions

6. Patients might feel depressed, afraid, angry, frustrated, alone or helpless

Peer support groups may meet at your hospital

Emotional and spiritual encouragement also is important to the healing process.

7. for lactating mothers undergoing radiation therapy.

- Advise patient not to breastfeed to prevent adverse effects to fetus.

- Advise patient to drink plenty of fluids to prevent dehydration.

Monitor nutritional status

Precautions taken while caring for a patient receiving chemotherapy are as follows:

We should first know that chemotherapy drugs are considered to be hazardous to people who handle them or come into contact with them. For patients, this means the drugs are strong enough to damage or kill cancer cells. But this also means the drugs can be a concern for others who might be exposed to them. This is why there are safety rules and recommendations for people who handle chemo drugs.

PRECAUTIONS THE CANCER CARE TEAM WILL TAKE

They put on special clothing and protective equipment being worn by the nurses and other members of your cancer care team.

Nurses who prepare chemo drugs use a special type of pharmacy that must meet certain regulations. And nurses and others who give your chemo and help take care of you afterwards wear protective clothing,

Such as 2 pairs of special gloves ,A gown

Sometimes goggles or a face shield. If you're getting IV chemo, there might be a disposable pad under the infusion tubing to protect the surface of the bed or chair.

If a caregiver does come in contact with any of your body fluids, they should wash the area very well with warm water and soap. It's not likely to cause any harm, but try to avoid this. At your next visit, let your doctor know this happened. Being exposed often may lead to problems, and extra care should be taken to avoid this.

Any clothes or sheets that have body fluids on them should be washed in your washing machine not by hand. Wash them in warm water with regular laundry detergent. Do not wash them with other clothes. If they can't be washed right away, seal them in a plastic bag.

SPECIAL PRECAUTIONS WHEN TAKING CHEMO BY MOUTH

Oral chemo or chemo you take by mouth and swallow. These drugs are as strong as other forms of chemo, and many are considered hazardous. There are usually special precautions for storing and handling oral chemo drugs. You might be told to be careful not to let others come into contact with it or your body fluids while taking it and for a time after taking it.

KEEPING FAMILY AND FRIENDS SAFE

There are certain safety precautions that might be needed during and after getting chemo. Unless your health care team tells you differently, you can usually be around family and friends during the weeks and months you're getting chemo. On treatment days, family and friends can often come with you. However, some treatment centers only allow patients in the infusion area and visitors may need to stay in the waiting room.

You are the only person who should be exposed to the chemo you are getting, but it can be irritating if it gets on your skin. Any spilled IV chemo, any powder or dust from a pill or capsule, or any liquid from oral or other kinds of chemo can be hazardous to others if they are around it.