**NSC 408**

**ADVANCED MEDICAL SURGICAL NURSING II**

**16/MHS02/004**

**ONCOLOGY AND NURSING CARE OF PATIENTS WITH CANCER**

**Nursing responsibilities towards a patient scheduled to receive neoadjuvant treatment**

* Assess and monitor vital signs
* Assess and assess patients level of pain using the pain scale and note the medication effective for pain relief
* Assess for constipation, bowel movements should be monitored and use effective bowel care protocol when needed
* Patients weigh should be monitored
* The patient and relatives should be educated on treatment process
* The nutritional status of patient should be assessed and patient should know the importance of food intake rich in proteins, fruits and vegetables
* Smaller meals should be given frequently
* Encourage patient to take plenty fluids
* Personal protective equipment should be used when caring for the patient
* Assess for fluid electrolyte imbalance, anorexia, nausea and vomiting and diarrhoea
* The skin should be assesses for any signs of skin irritation
* Monitor heart rate and blood level
* Educate on the importance of oral hygiene and assist when necessary
* Ensure that the visitation of patient is limited the prevent spread of infection
* Reassure patient
* The oral mucosa of the patient should be assessed
* Communicate frequently with patient and encourage them to ask questions
* Saturated fats, sugar, salt alcohol should be avoided

**Nursing responsibilities towards a patient receiving radiotherapy**

* Assess the patients oropharyngeal mucosa regularly if radiation therapy is directed to this area
* The nutritional status and general wellbeing should be assessed throughout the course of this treatment.
* If systemic symptoms such as fatigue occur, it should be explained to the patient that these symptoms are as a result of the treatment and do not indicate that illness is getting worse
* Protection of the nurse and patients from the effects of the radiation
* The procedure, delivery of radiation ,equipment, duration should be explained to the patient
* Ensure patient avoid close contact with pregnant women and children younger than 3 years
* A non-stressful environment should be provided for the patients and assist to carry out daily activities and physical care
* The teeth and gums should be cleaned with a soft tooth brush after meals and at least once a day
* Reassure patient and teach to report signs of dehydration, weakness, dizziness, and decreased urine output
* Monitor adverse effects such as skin changes, nausea and vomiting, diarrhoea
* Patient and family teaching should be done
* Monitor and assess pain level using the pain scale
* Obtain a complete list of patients medication and monitor for side effects
* Patient should be weighed weekly
* Teach patient to keep prescription of medications out of treatment fields to avoid a radiation bolus( concentrated dose)
* Beware that patients who complain of dysuria may require a urinalysis to rule out infection
* If patient has prolonged water diarrhea, consult the physician to prescribe anti-diarrheal drugs and a low residue diet
* The use of skin care products that hydrate the skin should be used for skin irritation but it should administered 2 hours before radiation treatment to prevent skin exacerbation
* Hydrogel pads can be used to reduce heat and promote comfort
* Radiation causes alopecia, mineral oil should be applied to affected area to reduce irritation
* Iv fluids should be given to maintain hydration and prevent dehydration
* Intake and output should be monitored and colour of urine should be recorded
* Refer patients with fatigue for physical therapy which can ease fatigue

**Precautions to be taken while caring for a patient receiving chemotherapy in my unit**

* Wear disposable long-sleeved gowns when preparing and administering chemotherapeutic agents
* Use biological safety cabinets for the preparation of all chemotherapeutic agents
* Surgical gloves should be won when handling antineoplastic agents
* Use luer-lock fittings on intravenous tubing used to deliver chemotherapy
* Dispose all equipment used in chemotherapy preparation and administration in appropriate leak-proof containers or puncture proof containers
* Dispose all chemotherapeutic waste as hazardous materials
* If their beds need to be changed, a gown should be worn along with gloves.
* When handling urine, gloves and gowns along with face shield should be worn because of the risk of splashing
* A disposable pad should be out under the infusion tubing to protect surfaces of bed or chair
* Ensure no one come in close contact with patient
* Gloves should be worn when touching pills and capsules
* If patient is incontinent and wearing a diaper, it should be placed in a plastic bag prior to placing into the yellow chemotherapy waste container