



**Billings Clinic Cancer Center**

***Patient & Family Care Guide***

**[www.billingsclinic.com](http://www.billingsclinic.com)**

*Billings Clinic HealthLine RNs (24 hours, 7 days a week):*

*255-8400 or 1-800-252-1246*



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Welcome,

Thank you for choosing Billings Clinic Cancer Center. We are here to provide you with cancer care that is unparalleled in our region. Our commitment begins with your diagnosis and continues throughout the course of your treatment.

One of our Cancer Care Navigators will be your guide and resource person. This means that you and your family will have access to the full spectrum of coordinated care here at Billings Clinic Cancer Center, including progressive up-to-date technology, innovative treatments, research options, expertly trained providers, integrated care at our Wellness Center, educational resources, social services, and other support services.

Needs may be many and varied for patients with a cancer diagnosis. Our goal is for you to feel comfortable and know that Billings Clinic Cancer Center is designed to meet all of your needs while embracing the values that we believe in - quality, service, people, teamwork, and integrity.

If you have questions, you can reach a Cancer Care Navigator by calling 238-2500 or 1-800-332-7156 and asking for one of the extensions listed below.

**Billings Clinic Cancer Care Navigators**

- Linda Allen RN, OCN – extension 2251
- Emily Dettro, RN – extension 2149
- Linda Dukart, RN – extension 2267
- Chris Kuehl, RN – extension 2120
- Mary Lou Simmons, RN, OCN – extension 2162



***Mission:***

To provide excellence in cancer care, cancer education, and cancer research for our patients and the communities we serve.

***Vision:***

Billings Clinic Cancer Center will be the ***premier, destination*** Cancer Center for the Northern Rockies Mountain Region of the United States. As a ***national leader*** in providing an ***integrative team approach*** to our cancer patients, we will encompass multidisciplinary evaluation, treatment, and research opportunities based on the expertise and passion of our clinicians.



## Billings Clinic Phone Numbers

Billings Clinic (If you need to reach a doctor after 5 PM weekdays, weekends, and holidays, call the first number listed)	(406) 238-2500 or 1-800-332-7156
Billings Clinic – HealthLine Registered Nurses (Calls answered 24 hours a day)	(406) 255-8400 or 1-800-252-1246
Billings Clinic – Hospital (If you need to reach a doctor after 5 PM weekdays, weekends, and holidays, call the first number listed)	(406) 657-4000 or 1-800-332-7201
Billings Clinic – Hospital, Atrium Pharmacy	(406) 238-2084
Billings Clinic – Hospital, Inpatient Medical/Oncology Unit	(406) 657-4390
Billings Clinic – Infusion Center (Staffed 7 AM – 9 PM weekdays; weekends and holidays per patient needs; see page 6 to contact an Infusion RN evenings, weekends, and holidays)	(406) 238-2540
Billings Clinic – Infusion Pharmacy	(406) 238-2210
Billings Clinic – Medical Social Worker/Counselor	(406) 238-5373
Billings Clinic – Medication Assistance Program (MAP)	(406) 238-5896
Billings Clinic – PALS Desk	(406) 238-2760
Billings Clinic – Pastoral Care	(406) 657-4747
Billings Clinic – Patient Accounts/Financial Services	(406) 238-5259
Billings Clinic – Pharmacy	(406) 238-5460
Billings Clinic – Research Nurse	(406) 238-2866
Billings Clinic – Same Day Care	(406) 238-2677
Hospice – Big Sky Hospice	(406) 247-3300
Hospice – Rocky Mountain Hospice	(406) 294-0785
Imaging Center/MRI Center	(406) 255-6530
Northern Rockies Radiation Oncology Center	(406) 248-2212 or 1-800-332-7156



## **How To Contact a Billings Clinic Infusion Center Nurse**

If you have a question Monday through Friday, from 7 am to 9 pm, call the Billings Clinic Infusion Center nurses at **238-2540**.

### **How to page an infusion nurse during evenings, weekends and holidays:**

1. Call the Billings Clinic operator at **238-2500**.
2. Instruct the operator that you would like the infusion nurse to be paged on pager **#690**.
3. Stay on the line and she will connect you with the infusion nurse **or** you can give the operator the number you are at and she will have the nurse call you back.
4. If the nurse has not called you back after 10 minutes then recall the Billings Clinic operator number listed above and have the nurse paged again.



## CANCER INFORMATION

Listed below are telephone numbers and Internet resources that will help you find information. These sites contain up-to-date, accurate information and will link you to other reputable resources.

### Web sites:

- |   |  |
|---|--|
| • Billings Clinic                       | <a href="http://www.billingsclinic.com">www.billingsclinic.com</a>                 |
| • National Cancer Institute             | <a href="http://www.cancer.gov">www.cancer.gov</a>                                 |
| • American Cancer Society               | <a href="http://www.cancer.org">www.cancer.org</a>                                 |
| • National Institutes of Health         | <a href="http://www.nih.gov">www.nih.gov</a>                                       |
| • American Society of Clinical Oncology | <a href="http://www.peoplelivingwithcancer.org">www.peoplelivingwithcancer.org</a> |
| • American College of Surgeons          | <a href="http://www.facs.org">www.facs.org</a>                                     |
| • Oncology Nursing Society              | <a href="http://www.ons.org">www.ons.org</a>                                       |

### Telephone numbers:

- |                              |                |
|------------------------------|----------------|
| • American Cancer Society    | 1-800-227-2345 |
| • Cancer Information Service | 1-800-422-6237 |



## TLC PROGRAM

After you meet with an oncologist, we encourage you to attend our TLC program. TLC stands for “Treatment Learning Class”. This 90-minute program will provide you with a wealth of information to learn more about cancer treatments and what to expect with your care at Billings Clinic.

Presenters include an oncology nurse, a registered dietitian, a social worker, and an American Cancer Society volunteer. In addition to information presented, a tour of common areas within the clinic and the hospital that you might visit are included in the session.

Our TLC program is offered twice weekly in the Oncology department:

- ◆ Tuesdays from 11:00 am until 12:30 pm
- ◆ Thursdays from 2:30 pm until 4:00 pm

Please let your Cancer Care Navigator or your physician’s nurse know which day and time works best for you.



## **RADIATION THERAPY**

Radiation therapy may be used in combination with chemotherapy, surgery or alone in treating your cancer. Treatment is obtained through Northern Rockies Radiation Oncology Center, a partner of Billings Clinic Cancer Center. You will receive your radiation therapy in a caring environment with state-of-the-art technology.

Individual treatment courses are coordinated by a team of professionals, including a radiation oncologist, medical physicist, radiation therapist, social worker and many others. Each treatment is unique to your disease, its location and your body. Side effects vary as to the area being radiated and may include nausea, vomiting, hair loss, fatigue, skin irritation, and diarrhea. Working as a team, we will manage these or other symptoms preventatively, or as they occur.

Please bring a friend or family member with you for your initial consultation as there is a lot of information given. We also ask that you bring your insurance information, a list of current medications and any allergies that you may have. Your consultation will help you make informed choices. If you decide to proceed with this cancer therapy the consult may be extended to include some initial treatment planning or an additional appointment may be necessary to complete this process. The consultation and planning process may take up to three hours. When you have completed the initial set up, your daily treatments are scheduled and generally last only minutes. Treatments are given Monday through Friday except in emergency situations.

The Northern Rockies Radiation Oncology Center provides a patient-centered approach to care and offers assistance with needs that a patient may have during treatment. Some services include individuals who can assist with transportation, housing, insurance, and financial issues; support groups; a licensed social worker/counselor; and volunteer services. Staff at The Northern Rockies Radiation Oncology Center work closely with the Billings Clinic Cancer Center team to coordinate services.

### **Northern Rockies Radiation Oncology Center**

2900 12<sup>th</sup> Avenue North (one block north of Billings Clinic – Hospital) (406) 248-2212.



## RESEARCH AT BILLINGS CLINIC CANCER CENTER

At Billings Clinic Cancer Center our goal is to provide you with state-of-the-art cancer care, which includes a quality research program. We participate in research through clinical trials with the Montana Cancer Consortium (MCC), Southwest Oncology Group (SWOG), National Surgical Adjuvant Breast and Bowel Project (NSABP), and Billings Clinic investigator-initiated studies through the Billings Clinic Research Center. By working with these groups, we provide access to a variety of clinical trials for cancer prevention, treatment, investigational drugs, and symptom management. At any one time, we participate in approximately 100 clinical trials that are available for different cancer diagnoses.

### How can I find out if there is a clinical trial for me?

Your physician and our cancer research nurse review all newly diagnosed cancer patients to see if we have a clinical trial for which you may be a candidate. All clinical trials have specific eligibility requirements that differ from study to study to make the research more reliable.

The following Web sites are reliable sources of information on cancer research if you are interested in further information:

- [www.billingsclinic.com](http://www.billingsclinic.com) – go to “Cancer”, then “Clinical research trials”
- [www.mtcancer.org](http://www.mtcancer.org)
- [www.cancer.gov](http://www.cancer.gov) – go to “Clinical Trials” folder

If you are eligible for a clinical trial, your physician and the research nurse will review a form called an **informed consent**. This explains the study, procedures, and the risk of the study. It may also ask about collecting blood or storing tissue for research or further study. This is your time to ask questions. You may want to take the informed consent home and discuss it with your family.

Many clinical cancer research trials are divided into three phases based on the question they are asking about the treatment. The phases are as follows:

- **Phase I** clinical trials are for new treatments after animal studies have been done and have shown some promise. This is the first testing of the drug on humans. The study group is very limited and for participants for whom no other known treatment has helped. The questions these trials answer are if a drug is safe in humans, how much drug can be given, and what are the side effects.



- **Phase II** are clinical trials that focus on whether a new treatment will shrink the cancer or improve symptoms. It is a very limited group of participants.
- **Phase III** compares the new treatment with the standard treatment. This usually involves having a treatment group that receives the new treatment and a control group that receives the standard treatment. A randomized method is used to decide who is in each group.

**Should you participate in a clinical trial? Here are some questions you may want to ask to help make a decision:**

- What is the purpose of the study? What is the phase?
- Does the study involve a randomization?
- What are possible short- and long-term risks, side effects, and benefits to me?
- What kinds of treatments, medical tests, or procedures does the study require?
- How often will I receive treatment? How long are the treatments? How long will I be on the study?
- Are the medications provided for the study?
- Where will my treatment take place?
- How will I know if the treatment is working?
- Will my insurance cover the cost of the study?

**If you want more information on clinical trials, please talk with your physician or contact:**

**Billings Clinic Clinical Coordinator – Cancer Research**

Kathy Wilkinson, RN, OCN, BSN

(406) 238-2500, extension 2866

[kwilkinson@billingsclinic.org](mailto:kwilkinson@billingsclinic.org)



## **BILLINGS CLINIC INFUSION CENTER**

The Billings Clinic Infusion Center provides excellent care to our patients and accommodates infusion needs with convenient hours. Patients are able to come to the Billings Clinic Infusion Center for their treatments and injections seven days a week. Hours are 7:00 am to 9:00 pm on weekdays. Hours will vary to meet patient needs on Saturdays, Sundays and holidays.

Chemotherapy patients are not the only patients treated at the Infusion Center. Patients with illnesses that require treatments using intravenous methods are also treated at this location.

Treatments may include:

- chemotherapy
- antibiotic therapy
- blood transfusions
- special injections
- other medications

The registered nurses at the Infusion Center are specially trained and certified to give chemotherapy. Many of them have passed a national certification exam to become an oncology certified nurse (OCN). This certification demonstrates their knowledge and commitment to continuing education and expertise in their field. We have pharmacists who specialize in oncology and infusions preparing medications on site for each individual patient as directed by an oncologist. Every patient is carefully monitored for the proper therapy and provided with drug information about potential interactions and side effects.

Families are encouraged to be with patients to participate in the education and care giving process. Light snacks and drinks are available for patients. Rooms are comfortable with lounge chairs and television available.

During your treatment, members of the Cancer Center healthcare team may visit you including: doctors, nurses, social workers, chaplains, receptionists, Cancer Care Navigators, and others. This interaction ensures that patient and family needs are being met and allow us as a team to connect with our patients.



## HOSPITAL CARE

### **Location:**

The Inpatient Medical-Surgical units are located on the third and fourth floors of the hospital. The Inpatient Surgical floor located on the second floor of the hospital.

### **Admission to the Hospital:**

If your admission to the inpatient unit is scheduled in advance, you will be notified of the time and date to go to the hospital. Patients who are being treated as outpatients may develop symptoms that require hospitalization. Hospitalization is made available day or night as needed.

### **Confidentiality – Do Not Report:**

If you would rather not be reported as a hospital patient at Billings Clinic, please let us know that you want your stay to be kept confidential. You will not be listed as a patient on the published list and your room number will not be released to anyone unless you contact them yourself. You may request confidentiality upon admission or anytime during your stay.

### **Patient Rooms:**

Each patient room is equipped with a phone. Your friends and family can use this phone number to reach you in the hospital. You will be responsible for giving out this number out at your discretion. Although staff will not give this number, calls received at the nurses' station can be transferred into your room.

### **Telephone Numbers:**

Calls may be made to the hospital switchboard at (406)657-4000 or 1-800-332-7201 and they will transfer the calls either to the patient room or nurses' station.

### **Local and Long Distance Calls:**

Outside lines are available. To access, dial 9 plus the desired phone number. Long distance must be charged to your calling card or by calling collect. Dial 9 + 0 + phone number (follow instructions). You may also dial zero and have the hospital operator help to connect you.

**Mail:**

Unless you choose confidentiality as a hospital patient, mail will be delivered to your inpatient room daily. Outgoing mail may be given to staff to mail at the mailbox located near the nursing stations.

**Parking:**

Parking is available to patients and families throughout the Billings Clinic campus. Signs are posted to indicate parking lots designated for patient and visitor use. Please ask for assistance if needed.

**Food Services:**

While you are hospitalized, dietary services will provide meals and snacks to meet your dietary needs. The menu you receive is designed to comply with the diet ordered by your physician. You will receive a menu from which to order your choices when it's convenient for you. You may order at any time during the hours of 6:30 a.m. - 7:30 p.m. by calling extension 3663.

We may keep a record of your food and fluid intake. These records allow the dietitian to determine the amount of calories, protein, and fluids you have consumed. Your dietitian and doctor use this information to assess if you need additional IV fluids or nutritional support.

During your stay, family members and visitors are encouraged to visit the cafeteria on the first floor. They may bring food back to eat in your room with you. Be sure to check with staff before you eat anything family and visitors bring to you.

**Television:**

As a part of our ongoing commitment to patient education, Billings Clinic regularly offers a selection of healthcare information on channel 21. Regular cable TV is also available in all patient rooms.

**Billings Clinic Smoking Policy:**

Billings Clinic is committed to providing a smoke-free environment for all patients, visitors and staff. Smoking is not permitted in any area of the clinic, hospital, or anywhere on the campus.



## A DAY IN THE LIFE OF A PATIENT IN OUR HOSPITAL

You may wonder what the routine is like for a patient in the hospital. What procedures are often done? What tests are usually run? What routine activities will be a part of everyday life on the unit? The inpatient nurse will explain the answers to these questions in more detail, but in general this is what you can expect:

### **Routine Blood Tests:**

Every morning the lab staff or nurses will draw routine blood tests. We will disturb you as little as possible, but our healthcare team needs to review your laboratory findings as early in the day as possible. Some lab tests may be drawn other times of the day as well.

### **Vital Signs:**

Your temperature, pulse, respiration and blood pressure, also known as your “vital signs,” will be taken every four hours or as your doctor orders.

### **Physical Examinations:**

At different times, the nurses and physicians will need to listen to your heart, lungs and abdomen with the stethoscope. They may also check your mouth and ask about your pain to help them in their assessment.

### **Bathing:**

Daily baths or showers are given to help cleanse the body of bacteria and often help a patient to feel better. Your nursing staff will work with you to fit your bath or shower into your schedule.

### **Measuring:**

Your urine, stool, and emesis (vomit) will be measured and may be tested. Please do not flush the toilet or dispose of this output; the nurse will do it for you.

### **Exercise:**

We encourage you to walk and exercise in the halls as able. If you are unable to do so safely yourself, staff will be available to assist you. Your doctor may order physical therapists to work with you as needed.

**Nutrition:**

Dietitians are available to help with nutritional needs, questions or concerns. They are an active part of your healthcare team.

**Rounds:**

Every morning your doctor and other members of your healthcare team will do rounds. This is to check on your progress and to make changes in your therapy if needed. This is a good time to ask any questions you may have and to discuss your plan of care.

**Visitor Guidelines:**

Billings Clinic promotes open visiting hours and welcomes you to stay with your loved one, however we do encourage families to keep in mind their own health and to get a good night's rest. Nursing will contact family members if any problem occurs. Please be sure to leave a contact phone number on file at the nurses' station.

**Preventing Infection:**

Family members or other visitors should not use the bathrooms in the patient rooms. There is a danger of infections both to the patient and to the visitor. Public restrooms are located on all nursing units. Environmental services staff will clean rooms daily and as needed.

**\*\*\* Any family member or visitor who has a fever, cold, or who is not feeling well should not come to visit.** Even minor colds and infections carry a risk to the person with cancer. Children in particular are known to carry many viruses. Please evaluate the health of children and their exposure to other children who have been ill, before allowing them to come and visit the hospital.

**\*\*\* Handwashing is the single most effective way to prevent the spread of infection.** Before entering and leaving a patient's room, everyone is expected to follow a simple, but thorough handwashing procedure. Please ask for help if needed.

**Fresh Flowers and Plants:**

Fresh or dried flowers may not be allowed in all patient rooms. Organisms grow in the plant or in the soil, which may cause infections. Non-latex balloons and silk flowers are okay. Make sure they have no decorative moss. Check with nursing staff if you have questions.

**Money and Valuables:**

Billings Clinic is not responsible for the loss of personal items. To assure their safekeeping, leave them at home or with family members. If valuables are brought in, you may request that they are locked up safely during your stay.

**Family Room and Sun Room:**

Everyone who uses the family room or the sunroom, both located on the third floor of the hospital, should help to keep it clean and respect others who may also be utilizing this space.

**Seeking Help from a Nurse:**

If you need assistance from nursing staff, please use the nurse call button on your TV control. Also, please use the nurse call button for help if an alarm rings in a patient room. The patient may have medications and fluids running on infusion pumps. These pumps and other monitors have alarms that beep for various reasons. Family members should not correct any alarms or adjust infusion pumps.

**Medications:**

The nursing staff will be responsible for administering all medications. Family or visitors should never give medications to the patient. Please notify your nurse if any medication alarms are noted.



## CANCER SUPPORT GROUPS

Billings Clinic Cancer Center now offers support groups for cancer patients, cancer survivors, their families and friends. If you have a cancer diagnosis or have survived cancer, it is helpful to have the support and companionship of others who have shared the same experience. These informal groups are guided by Billings Clinic professional staff, and will be tailored to the needs and wishes of those attending. The support groups are available at different times and places to meet the needs of our patients. You are welcome to attend any or all.

### **Cancer Support:**

Meets weekly on Mondays from 6:30 pm to 8:00 pm  
Billings Clinic Orthopedics & Sports Medicine Center  
2702 Eighth Avenue, North  
Billings, MT

*This group is for anyone wishing to attend.*

### **Cancer Support:**

Meets weekly on Tuesdays from 2:00 pm - 3:00 pm  
Billings Clinic – Hospital, 3<sup>rd</sup> Floor Sunroom  
2800 10<sup>th</sup> Avenue North, Billings

*This group is for anyone wishing to attend.*

### **Caregivers Support Group:**

Fourth Thursday of each month from 12 noon - 1:00 pm  
Billings Clinic – Hospital, Mary Alice Fortin Health Conference Center (next to cafeteria)  
2800 10<sup>th</sup> Avenue North, Billings

*This group is for those who are responsible for the decision making and care of a spouse, family member, or other loved one.*



## **SPIRITUAL CARE**

**Billings Clinic Pastoral Care Services** recognizes that supportive spiritual care can encourage healing and wholeness in your life. Our chaplains have received training to assist people of all faiths who desire pastoral support in coping with illness or trauma.

You are invited to visit our **All Faiths Chapel** located in the hospital atrium, across from Billings Clinic Atrium Pharmacy and Billings Clinic Senior Life Partners. Our interdenominational chapel is open 24 hours a day for prayer and reflection.

Billings Clinic chaplains seek to contribute to your healing in many ways:

- Spiritual and emotional counseling to help you and your family cope with illness
- Medical ethical advice, including counsel regarding the Five Wishes and Comfort One
- Chapel services each Sunday at Billings Clinic – Hospital’s All Faiths Chapel and in the Psychiatric Center
- Prayer and sacraments at your request
- Crisis counseling should you or a family member be told discouraging medical news
- Visitation before surgery to help prepare spiritually and emotionally
- Assistance in connecting you with spiritual care resources in your community
- Assistance in helping you become familiar with the medical institutions which are providing your care

**Billings Clinic’s Pastoral Care: 657-4000 or 1-800-252-1246, extension 4747.**



## FINANCIAL SUPPORT

At Billings Clinic Cancer Center we understand the impact of having a cancer diagnosis. It is not limited to the emotional impact but also has an economic impact. We can help you find resources and support. Please know that we identify how hard it may be to let someone know of your needs or concerns. We will provide those services with dignity, respect and confidentiality. To start the process, please talk to any member of the Cancer Center healthcare team.

Case management plays an important role in healthcare and can maximize your insurance benefits. Some insurance companies will provide this service to a patient. At Billings Clinic, we utilize Care Managers to help with many financial/emotional/medical/care-giving concerns. You will find a section specific to that department in this guide.

### **Health Insurance:**

Medical services are often covered in some part by health insurance. However, during the course of your treatments you may find organizing and dealing with your insurance company very traumatic or labor intensive. We offer some tips to decrease the burdens of billing, benefits and insurance paper work.

- When contacting your insurance company, always be prepared to supply your group, policy subscriber or certificate number.
- To understand your benefits, read your policy, and/or contact your benefit department of your insurance company. The key to collecting maximum benefits is to keep an accurate record of medical expenses. We will include a Medical Bill and Health Insurance log in this guide to help you keep track of your financial correspondence.
- Many insurance companies require pre-authorization for certain medical care and hospitalizations. Some companies request that patients contact them directly and other companies require the hospital to contact them. This information should be listed on your insurance card.
- Care Management is available to assist you if needed.

For patients without health insurance, staff will be available to help find possible resources available to you. Our community has several support systems in place. They are often-changing systems due to funding availability; therefore, the members of the Cancer Center healthcare team will have up-to-date information to assist you. The Care Management team members are your source for information on private and public funding.



## CARE MANAGEMENT

The Care Management team provides information and resources that enable patients and families to maintain optimal well being during medical and non-medical challenges. The Care Managers provide education and problem-solving regarding options and healthcare decision making.

Care Management staff includes registered nurses, social workers, benefit specialists (for pre-certification), regional case management, and a Cancer Care Navigator.

### **Services include:**

- Information and counseling regarding available resources and services, coordinating referrals as appropriate.
- Brief counseling in reference to understanding and coping with illness.
- Discharge planning for patients that may benefit from in-home services. Exploring alternative living arrangements as needed.
- Information and counseling on end-of-life issues, including the Five Wishes.
- Education to understand treatment options and disease specific education and information.
- Pre-certification and authorization of care for inpatient and outpatient surgeries and procedures.
- Patient advocacy within the Cancer Center and the community.
- Coordination with members of the healthcare team.

As a cancer patient, please ask for Care Management assistance or call your Cancer Care Navigator to obtain access to these services.



### **AMERICAN CANCER SOCIETY (ACS)**

550 North 31<sup>st</sup> Street, Suite 103  
 Billings, Montana 59101  
 Phone 406-256-7150 or 1-800-252-5470

### **Cancer Information Hotline: 1-800-227-2345**

Once the shock of hearing that you have cancer subsides, so many questions remain. Where do you find reliable, current and progressive information along with emotional support? You can call the American Cancer Society, where phones are manned 24 hours a day. They will connect you with services close to home to help both you and your family.

#### **American Cancer Society Web site:**

The World Wide Web can provide us with endless information and thousands of sites about cancer. It is important to get accurate information from reputable sources. A vast library is at your fingertips by visiting the American Cancer Society Web site at [www.cancer.org](http://www.cancer.org). You'll find information on the different types of cancer, the latest treatments, current research, and support programs from the ACS. Also available are links to other reputable Web sites.

#### **Informed Decisions:**

This is a complete book of cancer diagnosis, treatment, and recovery that offers the latest information covering everything from cancer causes and risks to coping tips and questions to ask your doctor. Informed Decisions can be purchased at your local bookstore, but is available at a discounted rate from the American Cancer Society at their online bookstore or by calling 1-888-227-5552. Currently it is available in the second edition. You may also view a copy at the local office here in Billings.

### **American Cancer Society Programs**

#### **Reach to Recovery:**

This is a one-on-one visitation program in which women who are breast cancer survivors meet with newly diagnosed breast cancer patients to share concerns and offer support and understanding. Reach to Recovery volunteers are carefully trained and never offer medical advice. A visit is free of charge, can occur at any time after diagnosis and may be requested by the doctor, the patient, or the patient's family.

**Look Good Feel Better:**

This is a program to help cancer patients deal with the physical side effects of treatment such as hair loss and skin changes. Trained cosmetologists offer tips on wig styling, turban tying, make-up, skin and nail care. The program is free of charge. Women participating receive a free make-up kit dependent upon availability. The program is in conjunction with the National Cosmetologists Association and the Cosmetic Toiletry and Fragrance Association Foundation.

**I Can Cope:**

This is a series of educational classes for people with cancer and their family and friends. "I Can Cope" provides information such as how cancer develops, diagnosis, treatment, side effects of treatment, new research and clinical trials, communication skills, emotion, self esteem, community resources and more. Classes are offered online and are free of charge. Patients and families can register at <http://www.cancer.org/onlineclasses>. Each online course takes about 20-30 minutes to complete.

**American Cancer Resources****Wigs:**

Wigs are available at the Northern Rockies Radiation Oncology Center free of charge; selection varies.



**AMERICAN CANCER SOCIETY  
Regional Field Offices**

**Billings, Montana**

1-800-252-5470  
(406) 256-7150  
550 N 31<sup>st</sup> Suite 103  
Billings, MT 59101

**Bismarck, North Dakota**

(701) 224-9954  
1102 S. Washington St., Suite 105  
Bismarck, ND 58504

**Casper, Wyoming**

907 N. Poplar Avenue, Suite 185  
Casper, WY 82601

**Missoula, Montana**

(406) 542-2191  
3550 Mullin Rd, Suite 105  
Missoula, MT 59808

**Rapid City, South Dakota**

(605) 342-7740  
2465 W. Chicago St.  
Rapid City, SD 57702



## ADVANCED CARE PLANNING

Advanced care planning is a concept of care that begins early in the course of a patient's disease. It is an ongoing process in which the patient, healthcare provider, and person chosen by the patient to represent them formulate a plan of care in the event that the patient is unable to make their own decisions. As the patient/doctor relationship continues, the plan should be updated periodically and with any disease progression.

Both the federal government and the state of Montana government support the importance of a patient's right to dictate the type of care that they wish for at end of life. The Federal Patient Self Determination Act and the Montana Rights of the Terminally Ill Act were written to ensure that you do have the opportunity to state those wishes in legal documents called advanced directives. There are several forms of these documents, including a living will, a living will designating a substitute decision-maker, and a durable power of attorney for healthcare.

**Advanced directives** come into play under two conditions. First, the doctor who is primarily responsible for your care must determine that you have a terminal condition. "Terminal condition" means an incurable or irreversible condition that will result in death in a relatively short time unless life-sustaining treatment (treatment which prolongs the dying process only and does not help cure the condition) is given. Second, you must have lost the ability to make your own decisions regarding whether or not to use life-sustaining treatment. As long as you can make your own decisions, you are encouraged to do so.

A **living will declaration** instructs your doctor to use or not use life-sustaining treatment if you have a terminal condition and are unable to make your own treatment decisions.

A **living will declaration, designating proxy**, is just like a living will, only you choose a person to make decisions for you if you have a terminal condition and are unable to make your own decisions.

A **durable power of attorney for healthcare** allows you to designate a person to make medical decisions for you, including decisions about life-sustaining treatment, if you become unable to make your own decisions.

A **Comfort One** provides on the spot identification to EMS and other healthcare providers *outside the hospital* that you do not want to be resuscitated. You will be provided only comfort care and be allowed to die in the natural course of your illness. Enrollment is



limited to those who have a terminal illness or those whose physician has ordered “do-not-resuscitate” status.

**Five Wishes** is a living will that addresses your personal, emotional, and spiritual needs as well as your medical wishes. It lets you choose the person you want to make healthcare decisions for you if you are not able to make them for yourself. It lets you specify exactly how you wish to be treated if you get seriously ill. It was written with the help of The American Bar Association’s Commission on the Legal Problems of the Elderly and the nation’s leading experts in end of life care. At Billings Clinic, we have certified staff persons who can assist you in completing the Five Wishes document. Please call 657-4740 for questions or to schedule an appointment.

If you have an advanced directive, please make sure to provide a copy to your doctors and the hospital. This way we can have access to your wishes. You can change your mind about your advanced directive at any time. You can tell your provider verbally or in writing. Your declaration will be immediately removed from your medical record and providers will do what you instruct them to do.

At Billings Clinic, we are ready to help you in the advanced care planning process. These are difficult but important decisions that need to be discussed. Providers will do everything they can to help you and respect your wishes. Their job is to take care of you in the manner in which you would like to be cared for.



## HOSPICE CARE

### *“A Place of Shelter and Care”*

Hospice care places the focus of care on quality of life, symptom control, relationships, values, and choices. Families and patients become prepared for serious illness transitions and the dying process. Grief support continues after loss. Hospice services can be given in the patient’s home, a skilled nursing facility, assisted living or retirement residence. Residential care is also available locally at the Hospice Horizon Home under the aspects of Big Sky Hospice.

Admission to hospice requires certification of a limited life expectancy, provided by a physician. However anyone can request information and to discuss hospice care and services at any time in their illness. Preparation and planning ease the stress of patients and caregivers when they have information available to them.

Medicare and Medicaid pay for hospice care to those that are qualified and many insurance policies have hospice benefits available.

#### **Yellowstone County:**

Hospice care in Yellowstone County is available through the Yellowstone County Health Department at Big Sky Hospice. For information, call (406)247-3300.

A privately-owned hospice (Rocky Mountain Hospice) is also available. For information, call (406)294-0785.

#### **Outside Yellowstone County:**

If you are outside of Yellowstone County and in need of hospice care, please call your Cancer Care Navigator.

Feel free to call your Cancer Care Navigator for any questions regarding end-of-life care.



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## SYMPTOM MANAGEMENT

Each patient's experience is different. Most patients will experience some of these symptoms, but not all. This information is offered as a resource for patients and family members. Please talk with members of your healthcare team if you have questions or concerns.

### **Suggestions for Coping with Cancer:**

- Ask questions of your doctor and other healthcare team members; do not assume anything. If you are not sure, use the telephone numbers provided and call.
- Remember, you are a member of the team and your input is important! Please keep us informed.
- Review the symptom sheets in this guidebook.
- Review hints for self-care if you are the patient or caregiver.
- Ask your family and friends for help before you are too fatigued.
- Keep a list of what friends and families can do.
- Organize your day into manageable segments.
- Remember the staff is here to support you and your caregiver. Call and ask for additional support as needed.

### **Taking care of the caregiver:**

Caregivers are encouraged to take care of themselves through exercise, proper diet, and adequate sleep. They can benefit by taking breaks from caregiving and by participating in the special programs we offer, such as support groups. In addition, there are other community programs available which can assist as well.

### **Tips for the caregiver:**

- Listen to your friends and be open to suggestions.
- Let go, know your limits, and focus on your strengths.
- Learn relaxation techniques and take care of your health.
- Maintain a life outside of your caregiving role.
- Keep a daily journal.
- Insist on private time and build a caregiving team who can help you.
- Rely on your sense of humor.
- Appreciate the benefits of leisure time.
- Find a support group; seek spiritual renewal.
- Seek professional help.
- Appreciate your own efforts.



## ANEMIA

There are several lab tests that are monitored to detect anemia, which is a lower-than-normal number of red blood cells. Red blood cells carry oxygen to the tissues of the body. Two lab tests commonly monitored to identify anemia are hemoglobin and hematocrit.

Hemoglobin is the substance in red blood cells that carries oxygen to all parts of your body. Hematocrit is the percentage of red blood cells in a blood sample. When your blood counts are low (hemoglobin or hematocrit), this condition is called anemia and your body tissues do not get enough oxygen to do their work.

Almost all cancer patients receiving treatment develop a degree of anemia. You may also experience anemia because of bleeding if your platelet count is low. Your type and stage of cancer, as well as the treatment prescribed by your doctor, will determine whether you develop anemia.

### **Important signs and symptoms – please contact your doctor with the following:**

- Dizziness or fainting.
- Shortness of breath.
- Unusual tiredness or weakness.
- Pounding in your head or headache.
- Ringing in your ears.
- Rapid heart beat.
- Chest pain.
- Difficulty thinking.
- Pale skin.

### **Ways to assist with your care:**

- Save your energy by having short periods of activity and resting between activities.
- To avoid dizziness, rise slowly and stand for a moment before walking. When getting out of bed, sit for several minutes before standing.
- Seek nutritional advice to include vitamin- and iron-rich foods and supplements in your diet.
- Injections may be given to stimulate your bone marrow to produce more red blood cells.
- Recognize that transfusions may be necessary.



## ANXIETY

It is very common for a person to feel anxious when facing a new or stressful situation. We all feel worried at times in our day-to-day lives. People may experience anxiety as nervousness, tension, panic, fear or feeling like something bad is going to happen. Anxiety can also be experienced as physical symptoms such as upset stomach, sweaty palms, fast heartbeat, and shaking or flushed face. Anxiety is a normal reaction, but it is important to understand that it can be reduced.

### **Important signs and symptoms – please contact your doctor with the following:**

- Feelings of dread and apprehension for several days.
- Physical symptoms such as sweaty palms, shaking, rapid heartbeat, and so on. Keep in mind that these symptoms can also be caused by side effects of treatment.
- Wide mood swings that you cannot control.

### **Ways to assist with your care:**

- Recognize that anxiety during treatment is normal, and so is getting help for it.
- Try to figure out what may be triggering the anxiety. For example, if you are anxious about a medical procedure, ask yourself what it is about the procedure that is upsetting. Then ask yourself how you can approach the situation so that it doesn't make you so anxious. Staff may be able to help make adjustments so talk to them about your concerns and worries.
- Getting the facts can help. For example, if you are worried about pain or discomfort, you can get information on how to manage pain or discomfort.
- Thinking about doing things that are pleasant and relaxing can help reduce anxiety. Relaxation is a skill, which can be used to counteract anxiety. We can teach you those techniques.
- If anxiety doesn't improve despite your efforts to reduce it, discuss it with a member of your healthcare team. Sometimes a combination of efforts, including medication, can help.



## BLEEDING

Platelets help the blood to clot or stop flowing if there is an injury. Chemotherapy destroys platelets and slows the production of new cells. If your platelet count falls below normal, this is called thrombocytopenia. Certain medications, injuries, vigorous exercise, or deep massage can trigger bleeding problems when your platelet count is low.

### **Important signs and symptoms – please contact your doctor with the following:**

- New or increased bleeding or bruising.
- Blood in your urine or stools.
- A nosebleed that does not stop.
- Vomiting of blood.
- Menstrual flow in which you use one or more feminine pads per hour.
- Little pinpoint red or purple dots on the skin or in the mouth (these are called petechiae and indicate bleeding under the skin).
- Falls or injuries.

### **Ways to assist with your care:**

- Do not take over-the-counter medications, herbs, or supplements without consulting your healthcare team. Certain products can increase your risk of bleeding. Do not take aspirin, ibuprofen, Naproxen (Aleve), Alka-Seltzer, or cold medicines containing these drugs.
- Take blood pressure medications as ordered. High blood pressure can trigger bleeding.
- Use a soft bristle toothbrush.
- Do not use razor blades; use electric razors for shaving.
- Use caution to avoid falls. No vigorous exercise or contact sports; follow activity guidelines from physical therapist or doctor.
- Do not receive deep massage.
- Do not blow nose hard or scratch inside of nose.
- Do not bend over with your head lower than your shoulders. Bend from the knees, and keep your head up.
- Women who are menstruating should use pads, not tampons.
- Women who are having break-through bleeding with intercourse should contact their doctor.
- No anal sex until platelets are stable.
- No rectal insertion of suppositories, enemas, or thermometers.



**How to control bleeding if it starts:**

- Apply pressure to the bleeding site. Hold pressure for a full five minutes before checking to see if bleeding has stopped. Applying ice to the site may also help to stop the bleeding. Remain calm. Call for help when needed.

**Caregivers: call 911 immediately for emergency response if the patient has uncontrolled, constant bleeding or is unconscious!**



## **BODY IMAGE CHANGES**

Treatment can affect your body and your life in ways that are hard on your self-esteem. This can include weight loss or gain, surgical scars, loss of stamina, skin reactions, puffy face, and/or hair loss—all of which can be distressing. Fortunately, most of the side effects of therapy, that affect appearance and stamina, are temporary.

The first step in coping with body image changes is to direct your energy and thoughts towards what you are able to do for yourself. Paying attention to skin care, diet, exercise, and positive attitudes are healthy ways to cope with body image changes.

### **Important signs and symptoms – please contact your doctor with the following:**

- Feeling sad most of the day, angry, or losing interest in life because of changes in the body.
- Lack of interest in personal hygiene or getting dressed every day.
- Changes in sleep patterns and/or eating habits.

### **Ways to assist with your care:**

- Express your feelings about body image changes to trusted family members, friends, or healthcare team members. Ask for help.
- Talk with other people who have had similar treatments; ask what they did and how they coped with changes in body image.
- List your best points. Then list your options on what you would like to do to maintain a positive body image.
- Laugh! Humor is a fine way to cope. Treat yourself to funny movies, TV shows, books or people.
- Consider using a hair alternative. Buy or borrow a wig. Use a hat or head wrap. Even consider going without!
- Wear comfortable and attractive clothing. Wear colors -- chemotherapy and radiation tends to make the skin pale, sallow, or ruddy. Colors and interesting patterns can decrease the intensity of these changes. Dare to be different.
- Take care of your skin. Select skin care products that you like and are fragrance-free, hypoallergenic and alcohol-free. Cleanse your skin twice a day. Mild soap and water are the most basic cleanser. All cleansing products should be applied gently to avoid pulling the skin.
- Use a moisturizer to help skin retain its moisture; avoid hot water.
- Wear sunscreen or protective clothes when outside.
- Report skin changes to your doctor or nurse.



## **BREATHING PROBLEMS**

Difficulty breathing may occur during your treatment and throughout the course of your disease. Symptoms include feeling short of breath, wheezing, and/or cough. A number of things can cause breathing problems: infection in the lungs, fluid in the lungs, bleeding, low blood counts, or other changes. The most common cause is infection. We ask that you do everything you can to prevent infection and irritation in your lungs.

### **Important signs and symptoms – please contact your doctor with the following:**

- Feeling short of breath or that you cannot get enough air.
- Trouble breathing when lying flat.
- Tightness or wheezing with each breath.
- Uncontrolled cough.
- Coughing blood or green/yellow sputum.
- New or recurrent cough.
- Become winded more easily with minimal activity.
- Temperature above 100.5 degrees Fahrenheit orally.

### **Ways to assist with your care:**

- Do not smoke or be around secondhand smoke.
- If you are a smoker, try to decrease usage or quit; if you need help, talk to a Cancer Center healthcare team member.
- Exercise daily.
- During the day, sitting is better than lying flat for long periods. An upright position lets the lungs expand and exchange oxygen better. Standing up and moving really helps the lungs expand.
- Avoid wearing clothes that restrict breathing.
- Avoid contact with any person who has signs of a respiratory infection (cold, fever, sneezing, runny nose, etc).
- Avoid breathing in cold air. Instead, breathe through a handkerchief.

**If you are unable to breathe comfortably, call for help immediately.**



## CHANGE AND UNCERTAINTY

The treatment process is one filled with changes and uncertainty. Questions you may ask yourself might include “When will this be done?” or “How can I plan ahead?”. Answers to these questions are difficult because each patient responds differently to treatment and complications are hard to predict. Patients can best adjust to this uncertainty by taking each day one day at a time.

### **Important signs and symptoms – please contact your doctor with the following:**

- Feelings of dread and apprehension for several days.
- Physical symptoms such as sweaty palms, shaking, and rapid heartbeat. Keep in mind that these symptoms can also be caused by side effects of treatment.
- Wide mood swings that you cannot control.

### **Ways to assist with your care:**

- Identify the change that is taking place and any options you have.
- Discuss change with your family and staff.
- Ask staff for explanations.
- Keep track of questions and information in your guidebook.
- When planning for the future, limit time spans as much as possible.
- If plans need to be made, consider back-up plans as alternatives.
- Talk about your hopes and disappointments with someone who listens.
- Talk with healthcare team members and ask for help if you feel overwhelmed or you are having trouble dealing with day-to-day activities or relationships.



## CONSTIPATION

It is common for people with cancer to develop constipation, especially when opioids (narcotics, pain pills) are being used. Dietary changes, radiation, inactivity, some chemotherapy drugs, anti-nausea drugs, and other medicines may also cause constipation.

Bowel movements can become infrequent, hard, and small in volume. Excessive use of laxatives can result in your colon being less responsive, so always discuss the use of laxatives with a member of the healthcare team.

### **Important signs and symptoms – please contact your doctor with the following:**

- A distended (swollen) abdomen or stomach pain.
- No bowel movement for more than three days.
- Dizziness and/or confusion.
- Back pain.
- Leaking liquid stools.
- Fever.
- Nausea and vomiting, in conjunction with no bowel movements.

### **Ways to assist with your care:**

- Drink plenty of fluid. Try to drink at least eight cups (two quarts) of liquid daily. Drinking hot water upon rising in the morning can stimulate the bowels.
- Eat cereals and breads high in fiber when possible. High fiber cereals can help. Some good ones are bran, oatmeal, or Fiber-One. Wheat spaghetti, bran muffins, and crisp rye bread are other good sources of fiber.
- Eat fruits and vegetables high in fiber. This includes fruits such as raspberries, blueberries, strawberries, raisins, dried prunes and apricots, oranges, bananas, and apples and pears with the skin on. Vegetables that are high in fiber include celery, bean sprouts, peas, carrots, broccoli, brussel sprouts, corn, and potatoes with the skin on. Baked beans with tomato sauce are quite high in fiber, as are cooked kidney beans and cooked lentils.
- If you are taking pain medications that contain an opioid (narcotic), you are encouraged to begin taking a stool softener, as opioids cause constipation. Use Senakot or Senakot S (whichever is recommended by your pharmacy).
- Keep as physically active as you can.
- You may need to use products like Metamucil or Citrucel to add bulk to your stool. Drink one or two glasses of water with these products.



- Be aware, however, that some of these products may have interactions with other medications that you are taking, so please check with your healthcare team before taking them.



## DEHYDRATION

Dehydration means there is not enough fluid circulating in the body, and as a result, the body does not function well. Dehydration can be caused by not enough fluid intake or excessive loss of fluid from diarrhea, vomiting, fever, and perspiring. Dehydration can cause complications such as increased weakness, low blood pressure, dizziness, rapid heartbeat and confusion.

### **Important signs and symptoms – please contact your doctor with the following:**

- Dizziness, lightheadedness, or fainting.
- Confusion.
- Decreased urination, dark urine, or strong smelling urine.
- Increased weakness and fatigue.
- Minimal fluid intake.
- New or increased vomiting.
- Diarrhea, more than 5 liquid stools a day.

### **Ways to assist with your care:**

- Drink as many liquids as possible. If you detect the signs of early dehydration you may be able to correct the problem by drinking more.
- Take anti-nausea medications as directed to prevent vomiting.
- Monitor for signs of decreased urinary output; pay attention to the color of your urine.
- If you experience diarrhea, follow the BRAT diet and take medications as directed to alleviate diarrhea.
- Call your doctor if you have dehydration symptoms so that additional fluids can be given as needed.



## DEPRESSION

Dealing with a life-threatening illness can cause a roller coaster of emotions. When the roller coaster plunges downward, feelings such as helplessness, despair, and sadness can be experienced. Most patients experience these feelings at some time during their treatment course. Symptoms of depression can include loss of appetite, change in sleep patterns, lack of energy, and inability to focus. Medications, such as steroids, can cause symptoms of depression. If you have had symptoms of depression or have been on anti-depressants before in your life, be sure to inform a member of the team.

### **Important signs and symptoms – please contact your doctor with the following:**

- Thoughts about hurting yourself or others.
- Feelings of sadness or hopelessness most of the time for several days or weeks.
- Feelings of worthlessness, shame, or guilt.
- Feelings that interfere with your ability to care for yourself.
- Loss of interest or inability to enjoy usual hobbies or activities.
- Changes in sleep patterns or eating habits.
- Changes in your relationships.
- Mood swings you cannot control.

### **Ways to assist with your care:**

- Talk about these feelings with someone you trust who is a good listener.
- Talk with other patients in your situation through support groups, telephone contacts, or internet groups.
- Use spiritual resources.
- Talk to your healthcare team members. Help is available in many forms – counseling, medications, group support, and one-on-one listening. Our staff is committed to the Billings Clinic *Hope for Tomorrow* programs which encourage holistic care.



## DIARRHEA

Diarrhea is frequent bowel movements (five or more per 24 hours) with a liquid consistency. Chemotherapy, radiation, medications, and emotional distress may cause diarrhea. Diarrhea can lead to dehydration and loss of electrolytes, so it is important to report it to the healthcare team.

### **Important signs and symptoms – please contact your doctor with the following:**

- New onset of diarrhea.
- More than five watery stool in 24 hours.
- Stomach cramping.
- Whole pills passed in the stools.
- Stools that are burgundy or black.
- Fever.

### **Ways to assist with your care:**

- Drink plenty of fluids.
- Follow dietary recommendations. If you experience diarrhea, follow a BRAT diet, which consists of bananas, rice, applesauce, tea and toast.
- Take medications as directed.
- Wash hands often, with warm soap and water.
- Keep rectal area clean.
- Contact your doctor's office if you have more than 5 bowel movements a day; be ready to report the type, frequency, consistency, and color of diarrhea, as well as the presence of stomach cramping.
- Your healthcare team may recommend Imodium if the diarrhea is severe.

Diarrhea is a common issue so please feel free to discuss it at your oncology visit.



## FATIGUE

Being tired is a very common experience for cancer patients. Cancer-related fatigue can cause one to feel weak and to lose interest in daily activities. It is an overwhelming lack of energy that can affect every aspect of a person's life. There are a number of possible causes for fatigue: the intensive treatments, physical problems, medications, anemia, disruption of normal resting and sleep habits, emotional stress, and feeling depressed. Unlike normal tiredness, cancer-related fatigue is not related to physical activity and is not relieved with a good night's sleep.

### **Important signs and symptoms – please contact your doctor with the following:**

- Dizziness or loss of balance.
- Inability to get out of bed or walk short distances.
- Difficulty performing simple tasks, such as cooking, cleaning, or taking a shower.
- Increased weakness or exhaustion.
- Drowsiness or confusion.
- Shortness of breath.
- Slower speech.
- Feelings of sadness or depression.
- Paleness or shakiness.

### **Ways to assist with your care:**

- Set up a regular daily schedule for nap and sleep times.
- Keep active during the day to sleep better at night.
- Playing soft music or the TV as a background sound.
- Engaging in meditation or prayer.
- Rest between activities.
- Plan activities for when you are the most rested.
- Participate in regular exercise to help reduce fatigue.
- Decide on the most important activities for the day; be realistic.
- Eat snacks between meals to keep energy up.
- Fatigue can be anemia-related (due to low red blood cells); use iron supplements or injectable medications that help to stimulate new growth of red blood cells or transfusions may be offered.

**Caregivers: call 911 immediately if you are unable to wake up the patient.**



## FEVER/INFECTION

Fever and chills are signs of possible infection. A cancer patient is very vulnerable to infection at specific times during therapy when blood counts are low. White blood cells are the infection fighting cells (see the last page of this Symptom Management section on White Blood Cells).

Acting promptly when you develop symptoms, rather than waiting for the situation to worsen, is very important. Also, keep in mind that not all patients with infection will have a fever, so calling for any symptom is important. If you are in doubt as to whether your symptoms are serious, please call! Your doctor can determine if more action is needed.

**URGENT signs and symptoms – please contact your doctor immediately with the following:**

- Temperature greater than 100.5 degrees Fahrenheit orally.
- Fever greater than 1 degree Fahrenheit above usual when on Prednisone (steroids).
- Shaking chills, with or without a temperature.

**Important signs and symptoms – please contact your doctor with the following:**

- Cough or shortness of breath.
- New redness, swelling, drainage, or pain on the skin or at a wound, central line, or IV site.
- New stomach or back pain.
- Headache; toothache.
- Pain and/or burning with urination.
- Confusion.

**Ways to assist with your care:**

- Take your temperature with onset of symptoms or as directed by your Cancer Center healthcare team. Take your temperature orally or under the arm; do not take a rectal temperature when receiving cancer treatments. Keep a record of temperatures and call your doctor for elevation above 100.5 degrees Fahrenheit orally. Do not allow others to use your thermometer.
- Drink plenty of fluids; rest as needed.
- Cover yourself with a blanket if you feel chilled.
- Place a cool washcloth on your forehead if you feel warm.
- **Do not take aspirin or other medications to reduce your fever unless your doctor instructs you to do so.**



## HAND-FOOT SYNDROME

Hand-foot syndrome is a side effect of some chemotherapy agents. It is characterized by a skin irritation that typically occurs on the palms of the hands and soles of the feet or other parts of the body where friction, pressure, rubbing, warmth, and/or sweating occur. Usually hand-foot syndrome is a mild reaction and improves in a couple weeks. However, it is important to understand that hand-foot syndrome can become severe in some patients and may require treatment delays or discontinuation of treatment.

### **Important signs and symptoms involving the hands or feet – please contact your doctor with the following:**

- Tingling, burning, numbness, or itching.
- Redness.
- Pain or tenderness.
- Flaking or peeling of the skin.
- Swelling.
- Rash.
- Small blisters or small sores.

### **Ways to assist with your care:**

- Inspect your hands and feet twice daily for signs of hand-foot syndrome.
- Wear loose clothing and comfortable shoes.
- Stay out of direct sunlight; wear sunblock (with at least SPF 15) when in the sun.
- Take cool showers or baths; use mild soaps and avoid washing skin vigorously. Pat skin dry after bathing; don't rub.
- Use plain, mild skin lotions or creams (such as Bag Balm or Udderly Smooth). Do not use creams with anesthetics, steroids, antihistamines, perfumes, alcohol, or glycerin as this can make the condition worse.
- Avoid hot water or steam (including while washing dishes); do not use whirlpool tubs, spas, or heated pools.
- Avoid repetitive or friction-causing activities.
- Avoid activities that place pressure on your skin (for example, kneeling or sitting on hard surfaces for long periods of time, leaning on elbows, gardening, carrying heavy objects, and excessive physical activity).
- Avoid putting tape, bandages, and other adhesives on your skin.
- If hand-foot syndrome occurs, use cooling measures such as cold baths and gel ice packs to the affected areas. If you do not have an ice pack, you can use a bag of frozen vegetables.



## MEMORY AND CONCENTRATION

Changes in memory and concentration are common throughout treatment. These changes are almost always medically related. In most cases, these will be temporary and will decrease as you continue to get better.

Memory and concentration problems may be situational and vary day-to-day due to stress, pain, medications, and/or fatigue. We understand that these may become an additional stressor and offer the following suggestions/coping strategies.

**URGENT signs and symptoms – please contact your doctor immediately with the following:**

- Disorientation.
- New onset of confusion.

**Important signs and symptoms – please contact your doctor with the following:**

- Forgetting things more quickly and more often than usual.
- Difficulty reading more than a paragraph or a page at a time.
- Difficulty with concentration and keeping your mind from wandering.

**Ways to assist with your care:**

- Write down important information; keep notes.
- Ask people to repeat things.
- Keep a list of questions for your doctor; write down the answers.
- Tape record important conversations or conferences.
- Keep an appointment calendar.
- Use a device to remind you to take your medications (such as a watch that can be programmed to go off at times when you need to take them).
- Keep things in the same place.
- Be understanding of yourself.
- If problems persist or affect day-to-day living, discuss symptoms with a Cancer Center healthcare team member.



## MOUTH PAIN AND MUCOSITIS

Mucositis and mouth pain are common physical problems for patients receiving chemotherapy and/or radiation treatments. These treatments lead to inflammation of the cells of the tongue, lips, mouth, throat, nose and gastrointestinal tract. Saliva usually becomes thicker and more mucous-like. Mouth sores or bleeding in the mouth may occur also. The person's experience may vary from mild discomfort to severe pain, which makes eating, drinking, swallowing, and sleeping difficult.

In addition, it is important to remember that because a person's ability to fight infection can be temporarily reduced during treatment, a patient with mucositis is more at risk for infection in the mouth.

### **URGENT signs and symptoms – please call 911 immediately with the following:**

- Inability to breathe.
- Choking.

### **Important signs and symptoms – please contact your doctor with the following:**

- Difficulty breathing.
- Problems swallowing.
- Bleeding in the mouth.
- Increased redness of your mouth or tongue.
- Blisters, white patches or open sores appearing on gums, mouth, or lips.
- Difficulty eating or sleeping due to mouth discomfort.
- Increased sensitivity of the lining of your mouth to hot, cold, or spicy foods.
- Significant mouth dryness.
- Pain in the mouth or throat that is not controlled with pain medicines.

### **Ways to assist with your care:**

- Rinse your mouth often with a room temperature salt and soda solution (one quart of water with one teaspoon of salt and two teaspoons of baking soda).
- Brush your teeth at least twice a day with a soft bristle toothbrush, as long as you are able. You may be able to use a water pick or toothettes if sores develop.
- Floss your teeth as long as it is comfortable and no bleeding occurs.
- Avoid mouthwashes which contain alcohol or peroxide, as these can dry and irritate your gums and the tissues in your mouth.
- Remove dentures and partial plates at night; if you have sores in your mouth, leave these out as much as possible during the healing process.



- If your mouth is dry, try drinking several glasses of water and other fluids throughout the day. Drinking through a straw may help to bypass tender areas.
- Try sugarless hard candy or sugarless chewing gum to relieve dry mouth. Ask your nurse or doctor about artificial saliva.
- Keep your lips moist. If your lips have open areas, use only a water-soluble moisturizer.
- Do not smoke or chew tobacco; do not drink alcohol. These irritate the mouth and throat.
- Avoid citrus foods and harsh foods (such as chips and hot spices). Foods of moderate temperatures are the best. Cold foods may ease the discomfort.



## NAUSEA AND VOMITING

Nausea and vomiting can be side effects of both chemotherapy and radiation therapy, depending on the site of radiation. Often times, because nausea and vomiting are two of the most talked about side effects of cancer therapies, people question whether they want to undergo treatment. However, there have been many advances in the management of nausea and vomiting in recent years. The amount of nausea and vomiting experienced by patients with cancer and the impact these symptoms have on one's quality of life has lessened due to these advances.

Contrary to what many people believe, nausea and vomiting have little to do with one's stomach. Instead, these symptoms are controlled by centers located in the brain and spinal cord. This means nausea and vomiting are involuntary responses and cannot be controlled by one's willpower.

Uncontrolled nausea and vomiting not only affect one's quality of life, but can also lead to dehydration. Thus, it is very important to understand factors that contribute to these symptoms. Let your Cancer Center healthcare team know if you are experiencing difficulties. We will work with you to reduce or eliminate nausea and vomiting.

### **A number of things can cause nausea and vomiting:**

- **Certain** (not all) chemotherapy drugs.
- Radiation to specific sites.
- Tumors, especially those that affect the gastrointestinal tract, liver, brain, or inner ear.
- Anxiety.
- Pain.
- Poor kidney and liver function.
- Dehydration and constipation.
- Some medications.
- Infections of the gastrointestinal tract.

Anti-nausea medicines (anti-emetics) are often started in conjunction with your treatment to prevent nausea and vomiting during times when you may be at the greatest risk to develop symptoms. Your doctor determines which medicines to use based on your specific treatment regimen. Staying on top of the symptoms will give you the best relief. Nausea is difficult to control if you let it get bad before taking anti-nausea medicines. You should take your "as needed" anti-nausea medicines as soon as you feel



nausea start. If the anti-nausea medicines are not working for you, tell your doctor – other medicines may be available.

**URGENT signs and symptoms – please contact your doctor immediately with the following:**

- Uncontrolled nausea and vomiting.
- Blood or “coffee ground” appearing material in the vomit.
- Severe stomach pain.
- Fainting.

**Important signs and symptoms – please contact your doctor with the following:**

- Nausea persists without control from anti-nausea medications.
- Vomit that shoots out for a distance.
- Weakness.
- Medication not staying down.
- Having difficulty eating or drinking (or keeping it down).
- A decrease in urine output.

**Ways to assist with your care:**

- Take your medication as ordered. If it is ordered “as needed”, take it when the nausea first starts and you will have better results.
- If your medication is not working, do not take more than prescribed. Call your doctor. Different medicine or a combination of medicines may work for you.
- Eat small frequent meals during the day and try a wide variety of foods and fluids; avoid spicy and/or greasy foods as these can increase nausea and vomiting.
- Food and beverages may be better tolerated when cool (at room temperature).
- Drink clear beverages, such as tea, apple juice and ginger ale that has lost its carbonation; sip small amounts throughout the day.
- Keep your mouth clean and rinse often.
- Avoid strong odors and perfumes.
- Be comfortable. Try relaxation skills, learn pressure points, visualization and breathing through your mouth.
- Some of these medications cause patients to be sleepy, so follow the label warnings. If you become nervous or jittery, let a member of your healthcare team know.
- Anti-nausea medications can also cause constipation. A stool softener daily will be helpful.



## NEUTROPENIA

Neutrophils are special white blood cells that our bodies use to fight infection. The term used to describe the state when neutrophils are low is neutropenia.

Cancer therapies, especially many types of chemotherapy, can cause neutrophils to decrease. Usually, neutrophils reach their lowest level (which is referred to as the “nadir”) about 7-14 days after each chemotherapy treatment. When this occurs, you are at risk for infection because your immune system is compromised.

Germs that cause infections can be found in food and water. The care you need to take depends on how effectively your immune system works. The following are general precautions that should be taken by all patients to prevent infection during neutropenia:

- Use good handwashing techniques (this includes your family members as well). *Handwashing is your best defense against infection!*
- Avoid people with illness.
- Do not share utensils or drinking glasses.
- Do not care for animal waste, such as changing litter boxes or cleaning bird cages.
- Do not dig in the dirt (gardening activities) or sweep outdoors. The reason for this is because organisms that can cause infection are commonly found in soil.

In addition, all cancer patients should follow the **Food Safety** and **Water Safety** recommendations listed on **Attachments A and B** following this page.

Patients receiving standard doses of chemotherapy or radiation therapy should follow specific instructions provided by the healthcare team. The ability of each person to fight infection will depend on a number of factors such as the cancer site, type and dose of treatment, age, and other risk factors.

For cancer patients receiving treatment that includes stem cell transplant, high-dose chemotherapy, or prolonged neutropenia (ANC less than 1000 for more than 2 days), a special diet is recommended because these patients are at a higher risk for infections from food and water. This special diet is referred to as a “Neutropenic” diet and involves avoidance of certain foods when the immune system is weakened.

**Neutropenic Diet** guidelines are listed on **Attachment C**.



## FOOD SAFETY GUIDELINES – ATTACHMENT A

Bacteria and other organisms exist in most common foods. Most of these organisms are of little risk to the average healthy person. However, persons undergoing chemotherapy, radiation, or a stem cell transplant are at increased risk for infections, including food borne illness. By following safe food practices, patients and caregivers can reduce the risk of food borne illness.

All persons are recommended to follow the food safety guidelines discussed below. In addition, cancer patients receiving treatment that includes stem cell transplant or high-dose chemotherapy, or those with prolonged neutropenia (an ANC less than 1000 for more than 2 days) are recommended to follow the “Neutropenic Diet” guidelines (see Attachment C).

### Food Preparation

- Wash hands frequently with soap and warm, running water before eating and before and after every step in food preparation. This is critical before and after handling raw meat, seafood, and poultry.
- Replace dishcloths and dishtowels daily. They should be laundered in the hot cycle of your washing machine.
- Wash counter tops, utensils, cutting boards, and can openers with hot soapy water. After washing, they can be sanitized with a solution of 1 teaspoon of chlorine bleach in 1 quart of water.
- Keep raw meat, fish, and poultry and their juices away from other food. After cutting these foods, wash the cutting board, utensils, and counter top with hot soapy water, then sanitize with a bleach solution as above.
- Always wash fresh fruits and vegetables under cool running tap water before eating.
- Cut away bruised or damaged areas on fruits and vegetables.
- Use a scrub brush on potatoes or carrots if the skins are to be eaten.

### Safe Cooking

- Cook eggs until they are firm, not runny. Do not eat foods that include raw or partially cooked eggs.
- Cook poultry until the juices run clear and it is white in the middle. Never eat rare poultry.
- Cook fish until it is opaque or white and flaky.
- Cook ground meat until it is brown inside. This is especially critical with hamburger meat.



- Keep hot foods hot and cold foods cold. Do not leave food out more than 2 hours unless on a heat source or on ice.
- Use leftovers within 4 days.

### **Shopping**

- Do not choose packages that are damaged, cans that are dented, or jars that are cracked. Check that packaged and boxed foods are properly sealed.
- Do not purchase foods if “sell-by” or “best used by” date has passed.
- Choose only pasteurized milk, cheeses, or juices.
- Select frozen and refrigerated foods last and get them to a refrigerator or freezer as soon as possible. Place perishable items inside air-conditioned car not the trunk, especially during the summer months.
- Place meat, poultry, and fish in plastic bags. Ask to have these items placed in separate bags from all other foods.
- Avoid deli-style food, bulk food, and free store samples.

### **Food Storage**

- Keep the refrigerator temperature at 40 F, the freezer at 0 F.
- Rotate food stock so older items are used first. Do not use foods past the expiration date.
- Keep all food storage areas clean.
- Place securely wrapped raw meat, fish, and poultry into the meat drawer or on the bottom of the refrigerator so that the juices will not leak onto other foods.
- Cook or freeze fresh ground meats, fish, and poultry within 2 days: other beef, pork, veal, or lamb within 3 to 5 days.



## WATER SAFETY GUIDELINES – ATTACHMENT B

### Tap Water

Water from your home faucet is considered safe if your water is from a city water supply or a municipal well serving highly populated areas.

### Well Water

Well water from private or small community wells is not considered safe for consumption by persons considered at risk for infection unless it is tested daily and found to be negative for coliforms and *Cryptosporidium* organisms.

- **Municipal wells:** Drinking well water from municipal wells serving highly populated areas is considered safe because the water is tested for bacterial contamination more than two times each day.
- **Private wells and small community wells:** The quality of well water from these sources cannot be guaranteed unless it is tested daily and found to be negative for coliforms and *Cryptosporidium* organisms. It is recommended that other approved sources be used instead, including: boiled water or bottled water (see guidelines below).

### Safe Water Sources

The following sources of water are suggested if your water is not from a city water or municipal well supply.

- **Boiled Water** – At home, safe water can be made by bringing tap water to a rolling boil for one minute. After boiling, the water should be stored in a clean covered container in the refrigerator; discard water not used within 72 hours (3 days).
- **Distilled Water** – water may be distilled using a steam distillation system. After processing, the water should be stored in a clean covered container in the refrigerator; discard water not used within 72 hours (3 days).
- **Bottled Water** – Acceptable forms of bottled water have been processed to remove organisms known to cause stomach or intestinal infection. Bottled water labels reading “well water”, “artesian well water”, “spring water”, or “mineral water” *do not guarantee* that the water is safe to drink. Water labeled as having been treated with one or more of the following are considered safe:
  1. Reverse osmosis treated
  2. Distillation
  3. Filtered through an absolute 1 micron or smaller filter



Members of the International Bottled Water Association (IBWA) follow more strict manufacturing practices in their water bottling process than those currently mandated by the United States Food and Drug Administration. Therefore, water bottled by a member of the IBWA may be preferable.

### **Water Filters**

*Most water filtration devices will not make the water safe if the water supply has not been previously chlorinated.* If you choose to install water filters on household water taps purchase only filters certified by NSF International. The following specifications must also be met:

Portable water filters as well as refrigerator-dispensed water and ice machine systems do not meet filtration standards. Portable water systems filter out chemical impurities, not bacteria. If a portable water system is used in combination with a safe water supply (to improve water flavor and remove chlorine and other impurities), it is recommended to change the system's filters frequently according to manufacturer's guidelines.



## NEUTROPENIC DIET – Attachment C

All cancer patients should follow the Food Safety and Water Safety recommendations listed on Attachments A and B.

Cancer patients receiving treatment that includes stem cell transplant or high-dose chemotherapy, or those with prolonged neutropenia (an ANC less than 1000 for more than 2 days) should avoid certain foods (listed below) because there is a higher risk for infections from food and water. In addition, these patient need to avoid:

- Fast food
- Buffet-style food
- Food from delicatessens
- Food from street vendors
- Bulk food
- Free store samples
- Salad bars

The length of time these guidelines should be followed is:

- Until your Absolute Neutrophil Count is above 1000 or as individually directed by your healthcare team if you are receiving high-dose chemotherapy or are otherwise instructed to follow this diet.

	<b>Allowed:</b>	<b>Not Allowed:</b>
<b>Beverages</b>	<ul style="list-style-type: none"> <li>• Tap water or bottled water.</li> <li>• Instant and brewed coffee and tea.</li> <li>• Individual cans or bottles of carbonated beverages.</li> <li>• Pasteurized fruit and vegetable juices.</li> <li>• Fresh squeezed fruit juice.</li> <li>• Individual frozen juices.</li> <li>• Canned, bottled, and powdered beverages and sports drinks.</li> <li>• Commercial nutritional supplements.</li> <li>• Commercial eggnog.</li> </ul>	<ul style="list-style-type: none"> <li>• Well water (unless tested daily and found to be free of coliforms and cryptosporidiums).</li> <li>• Cold-brewed (sun) tea.</li> </ul>



	<b>Allowed:</b>	<b>Not Allowed:</b>
<b>Fruits, Vegetables</b>	<ul style="list-style-type: none"> <li>• Well-washed fresh fruits and vegetables.</li> <li>• Canned fruits and vegetables.</li> <li>• Cooked vegetables.</li> <li>• Frozen vegetables.</li> <li>• Well-washed herbs.</li> <li>• Canned pepper and seasonings.</li> </ul>	<ul style="list-style-type: none"> <li>• Raisins, coconut, and dried fruit (unless used in cooking).</li> <li>• Fresh ground pepper</li> <li>• Commercial salsas from the refrigerated section of grocery stores.</li> </ul>
<b>Meat, Meat Substitutes</b>	<ul style="list-style-type: none"> <li>• Well-cooked meat, fish, poultry, or substitutes (including hot dogs).</li> <li>• Single-serving cooked, canned, or frozen products (nothing raw).</li> <li>• Tuna or chicken salad.</li> <li>• Cooked baked beans.</li> <li>• Well-cooked eggs and pasteurized egg substitutes; cooked tofu.</li> <li>• Commercially-packaged salami, bologna, and other sandwich meats.</li> <li>• Canned and commercially-packaged hard smoked fish (refrigerated after opening).</li> </ul>	<ul style="list-style-type: none"> <li>• Raw, rare, or medium-rare cooked meat, fish, poultry, tofu, or eggs.</li> <li>• Cold meat, poultry, smoked salmon, or lox.</li> <li>• Pickled fish.</li> </ul>
<b>Fats</b>	<ul style="list-style-type: none"> <li>• Oil, shortening, margarine, butter.</li> <li>• Cream cheese, sour cream, refrigerated lard, commercial mayonnaise and salad dressings (refrigerated after opening).</li> <li>• Non-dairy creamers.</li> <li>• Commercially-packaged peanut butter.</li> <li>• Canned or bottled roasted nuts.</li> </ul>	<ul style="list-style-type: none"> <li>• Fresh salad dressings containing aged cheese or raw eggs.</li> <li>• Avocado dressing.</li> <li>• Raw nuts or roasted nuts in the shell.</li> <li>• Dried fruits or raisins (unless they are used in baked products).</li> </ul>
<b>Breads, Grains, Cereals</b>	<ul style="list-style-type: none"> <li>• Individually packaged breads, bagels, rolls, muffins, sweet rolls, etc.</li> <li>• Well-cooked pancakes, waffles, and french toast.</li> <li>• Single-serving packages of potato chips, corn chips, tortilla chips, pretzels, crackers, and popcorn.</li> <li>• Cooked pasta, rice, and other grains.</li> <li>• Cereals – cooked and individually packaged ready-to-eat.</li> </ul>	<ul style="list-style-type: none"> <li>• Raw grain products.</li> <li>• Cereals containing nuts and dried fruits.</li> </ul>



	<b>Allowed:</b>	<b>Not Allowed:</b>
<b>Dairy</b>	<ul style="list-style-type: none"> <li>• <u>Pasteurized</u> milk and milk products (such as buttermilk, chocolate milk).</li> <li>• <u>Pasteurized</u> yogurt and whipped topping.</li> <li>• <u>Pasteurized</u> cottage cheese.</li> <li>• Individually packaged cheeses (made with pasteurized milk).</li> <li>• Processed cheese.</li> <li>• Commercial ice cream, frozen yogurt, sherbert, ice cream bars, milkshakes (commercial frozen or made with individual cartons of ice cream and milk).</li> </ul>	<ul style="list-style-type: none"> <li>• <u>Unpasteurized</u> dairy products, such as raw milk, naturally aged cheeses (sharp cheddar, brie, feta).</li> <li>• Yogurts with live and active cultures.</li> <li>• Cheeses with chili peppers, uncooked vegetables, and those made with molds (blue, gorgonzola, roquefort).</li> <li>• Milkshakes made from non-commercial ice cream or made in a blender.</li> <li>• Yogurt or ice cream from a machine.</li> <li>• Eggnog made from raw eggs.</li> </ul>
<b>Other</b>	<ul style="list-style-type: none"> <li>• Cakes, pies, cookies, baked custard.</li> <li>• Pudding, gelatin, popsicles.</li> <li>• Canned and homemade heated soups.</li> <li>• Commercial (pasteurized) honey.</li> <li>• Jam, jelly, syrups, catsup, mustard, barbeque sauce, soy sauce, commercial pickles and pickle relish (refrigerated after opening).</li> <li>• Candy, gum.</li> </ul>	<ul style="list-style-type: none"> <li>• Cakes with raw nuts.</li> <li>• Cream pies.</li> <li>• Raw honey.</li> <li>• Seeds (such as sunflower, pumpkin, etc).</li> <li>• Loose candy and gum from public dispensing units.</li> <li>• Candy with nuts or raisins.</li> </ul>



## NUTRITION DURING TREATMENT

Nutrition during your cancer treatment is an important part of staying healthy. A well-nourished body is able to tolerate cancer therapy better, so side effects may be less severe. The body heals better when one eats well.

We encourage you to eat a well-balanced diet and drink plenty of water. Eight glasses of water a day is recommended. Eating and drinking properly may not be easy during treatment. Sometimes your appetite and desire for food may not be normal. Your appetite may increase or decrease. Maintain as normal an eating pattern as you can.

What we eat is used by our bodies and then discarded. This pattern can sometimes change and the bowels may be irregularly loose or extra firm. Medications, such as narcotic pain pills, can cause constipation. Senekot S laxative pills may be taken as needed, starting at 1-2 pills a day and increasing to a pill with every pain pill if necessary. Immodium AD can be used as directed for loose stools.

### **Eating Hints**

The usual guidelines are variety, moderation, and a balanced diet. The basic five food groups are still very important. While it is still our goal that you be able to eat a balanced diet, you may not always be able to do so during treatment. You may need to eat whatever you can. These changes are usually temporary.

There will be good and bad days. Eat what you can on bad days and make up for it on good days. Try not to lose weight. This is not the time to diet. Sometimes you will need to consume extra calories and protein. Often, that may be when you least feel like eating. Dietary supplements, such as Ensure or Boost, would be helpful. You can use Carnation Instant Breakfast with an extra portion of milk (liquid or dry) or add ice cream. If you are losing weight, you may need further assistance from a dietitian or naturopathic physician.

If you are on a special diet, such as a diet for heart disease or diabetes, this may be the time to relax those restrictions while on therapy. Be sure to discuss this with your doctor first.

This general information may not be enough for you, depending on your diagnosis and the kind of therapy you are on. There are more detailed booklets available and people who can help you. In addition, our dietitian or naturopathic provider can meet with you to discuss options and answer questions about how supplements work. Please let a member of the healthcare team know if you are interested in any of these resources or call your Cancer Care Navigator to assist you.



## PAIN MANAGEMENT

Pain is an unpleasant sensation that only you can feel. It is what you say it is. Your communication is our means of knowing the extent of your pain.

Cancer patients may experience pain during the course of their illness. Most pain can be treated with pain medication and/or other treatments. Your doctor and other Cancer Center healthcare team members will help you find the best possible way to control your pain. On occasion, your doctor may ask a pain management specialist to help manage your pain.

As a patient, you have the right to information about pain and pain management. You have the right to have your pain treated promptly, and have healthcare providers that believe your report of pain.

We will ask often about your pain, using a standard rating scale of 0-10, with 0 being no pain and 10 being the worst pain that you have ever had or could imagine. Being able to describe your pain will also be helpful, using a variety of words can help us determine what treatments will work best for your pain. Some of these words could be constant, intermittent, sharp, dull, burning, stabbing, nagging or aching.

Please ask about pain management, discuss options with your doctor or other healthcare team members, and inform us when pain treatment is not working for you. We can help you create a pain control program designed to meet your individual needs.

### **What are ways to treat your pain?**

Your pain can be treated many different ways. Medication is an effective treatment for pain. Your doctor may prescribe Tylenol, ibuprofen or opioids (narcotics) such as morphine. Sometimes the doctor may use a local anesthetic. In some instances, radiation is used for pain control. The method depends on the location and severity of your pain.

Pain medication can be given in different ways.

- Pills (both long- and short-acting).
- Skin patch.
- Intravenous (through a needle into a vein).
- Subcutaneous (using a small needle under the skin).
- Buccal (placing medication inside the cheek).
- Sublingual (placing medication under the tongue).

*Billings Clinic HealthLine RNs (24 hours, 7 days a week):*

*255-8400 or 1-800-252-1246*



- Rectal suppositories.
- PCA pump (a small computerized pump that allows you to administer medicine that controls your pain).
- Epidural (a small tube inserted into your back).

Some pain medications are to be taken on a regular basis (called long-acting medications), while others should be taken only when you begin to feel pain (called break-through medications). You will be instructed on how to take these when given your prescription. Please remember that long-acting medications are never to be chewed or crushed.

### **Fears related to use of opioids (narcotics):**

- Some people worry they will become addicted. Research has shown that this is not true. If your pain medicine is used the way in which it is prescribed then addiction is rare. Tolerance may develop but adjustments can be made to provide for ongoing pain relief.
- Some patients do not want pain medications for fear of the side effects. Nausea, vomiting, sleepiness, constipation and itching are common side effects, but can be managed with time, adjusting doses, changing medications, or adding other treatments.
- Some patients worry that if they use pain medications for a long time, the medications will then no longer work later on in the disease process. Research has shown that this is not true. When pain is present, we need to treat it. Patients who need pain relief will be offered medications. There is never a time to stop providing pain control.

### **Non-drug methods of pain relief:**

By utilizing many of these therapies alone or in combination with medications, you can have effective pain control. We will be happy to provide resources and instruction in the use of these therapies.

- |                     |                     |
|---------------------|---------------------|
| • Massage           | • Yoga              |
| • Therapeutic touch | • Music therapy     |
| • Imagery           | • Acupuncture       |
| • Relaxation        | • Hot or cold packs |
| • Aromatherapy      |                     |

**Taking care of your pain will help you sleep better, feel stronger and be better able to cope with your illness.**



## PERSONAL HYGIENE

With a diagnosis of cancer and the initiation of treatment, it is important for you to pay close attention to personal hygiene. Both chemotherapy and radiation can affect your skin, hair, and the membranes of your mouth. Below are some helpful hints.

### **Skin Care:**

The primary function of the skin is to reduce water loss, provide protection against abrasive action and microorganisms, and act as a barrier to the environment. Basically, your skin protects your body both inside and out. Your skin is made up of cells which are continuously being replaced and the old ones are being shed. Chemotherapy and radiation may change this turnover process. It may also cause your skin to be drier or more sensitive to the sun. You will want to keep your skin very clean, use sunscreen when you are outside, and use moisturizers as needed. Drinking lots of water every day will also help.

Hangnails can easily become sore or infected, as can scratches or cuts. Be careful to keep your nails in good repair and to avoid scrapes and cuts as much as possible. Your feet deserve the same care as your hands. It is advisable to wear shoes to protect your feet. Changing your shoes on a daily basis will prevent wear patterns on your skin.

Skin is also sensitive to pressure and a red mark on the skin is often an indication that there has been pressure on a particular area for too long. It is very important to avoid prolonged pressure to any area. Frequent position changes and loose garments help assure this.

Radiation therapy can change the color of your skin, giving it a sunburned or suntanned appearance. This will return to normal after a time, but meanwhile cleanse your skin gently, make sure to dry thoroughly any skin folds, and use any prescribed skin treatment as directed.

Hand washing is an important way to keep away from germs ... both your own germs and other people's germs. Someone else has touched most everything we touch and germs live everywhere. We are generally resistant to the germs in our everyday living environment, but with cancer treatment, your resistance may be lower. After chemotherapy, your body will discard the chemotherapy for a 48-hour period, so you will need to be careful not to share "leftover chemo" with anyone. What this means is that after using the toilet, you should flush twice to ensure no residual chemotherapy remains in the bowl. Overall, personal hygiene can not be over-emphasized due to its very important protective function.

**Hair Care:**

It is important to keep your hair clean during cancer treatment. Because chemotherapy can cause hair loss, it is best to use a gentle shampoo and washing method. If you receive treatment that will result in hair loss, you may notice some tingling of the hair follicles or tenderness of the scalp just prior to the time of loss. It tends to start falling out about two weeks after the start of your therapy. Your hair may slowly thin, come out in clumps, or come out all at once. Every individual is unique so it is impossible to predict how hair loss will occur for you. It may be more comfortable and less messy if you get a very short haircut or even shave your head at this time.

Not only will the hair on your head fall out, but also your facial and body hair and some hair that we don't think about (such as the tiny hairs in your nose). Eyebrows and eyelashes may also fall out. After the completion of (or sometimes during) your treatment, your hair will grow back. In the meantime, you are encouraged to be as creative as possible with head coverings. A head without hair allows quite a bit of body heat to escape, so you may be a lot more comfortable with a head covering on, even at night.

**Mouth Care:**

It is important that you keep your mouth clean and the tissues intact. Dental caries can cause problems, so if you have not had a recent dental check-up, it may be recommended that you do so before the start of your therapy.

Some types of chemotherapy disrupt the lining of your mouth, gums, throat, and esophagus, causing open sores and pain in these areas. During this time, it is especially important to keep your mouth clean. Frequent gentle brushing is recommended. If you have dentures, they should be cleaned frequently. If sores develop, it may be necessary to keep dentures out to maximize comfort and healing. Mouth rinses are also helpful, but avoid using harsh mouthwashes that contain alcohol.

Sometimes chemotherapy or radiation therapy causes your mouth to be very dry and the saliva to thicken. It will be more comfortable if you keep it moist with frequent sips of water and drinking plenty of fluids. Hard candies, such as lollipops or lemon drops, can be helpful. There are also other products available for dry mouth.

Some types of chemotherapy may leave you with a metallic taste in your mouth. This may interfere with eating, but does not cause damage to the lining of the mouth. A strong mint before a meal may disguise the metallic taste for a short while. Please report any of these symptoms to your Cancer Care healthcare team. At times, prescription medications are necessary to treat open sores, painful swallowing, and/or dry mouth.



## SEXUALITY

Sexuality is an important part of an individual's health and well-being. It affects individuals of all ages. Sexuality includes not only physical actions, but emotional connections as well. Discussing these issues may be avoided due to the sensitive, personal nature of the subject. However, we want to acknowledge sexuality as an integral part of your life and encourage you to visit with your physician or nurses about the impact cancer may have on your sexuality.

Cancer and its treatments can influence sexuality in a variety of ways including:

- Self-image – physical changes (due to surgical procedures or weight loss) and emotional issues (such as anxiety, fear, or depression) can affect the way you see yourself; please refer to the section in this guidebook regarding “Body Image Changes”.
- Relationships
- Sexual functioning – this can be affected by changes in self-image, decreased desire, side effects of treatments (such as nausea or fatigue), and numerous other reasons which can interfere with sexual desire or participation in social engagements.
- Reproductive ability – if you are of child-bearing ability, talk with your oncologist about reliable forms of birth control while receiving cancer treatments. In addition, if you wish to have children in the future, visit about available options for maintaining your fertility.
- Financial burdens – these may be a source of worry that can affect your sexuality.

It is important to recognize that not everyone undergoing cancer treatment will experience problems with their sexuality. However, if you do, understanding how cancer treatments may affect you will help you deal with the changes. In addition, some questions frequently asked by patients and family members affected by cancer are listed below.

### Frequently Asked Questions about Sexuality

**Q: What is normal sexuality?**

**A:** Normal sexuality is defined by you and your partner – together you both agree on what gives you mutual pleasure. There are many ways to express sexuality – caring, touching, kissing, caressing, embracing, and sexual intercourse are all examples of sexuality.



**Q: Is cancer contagious?**

A: No, you cannot spread cancer by participating in sexual activities.

**Q: What is loss of libido?**

A: This is the lack of desire to express oneself sexually. For some, there is no thought or sexual desire; for others, the thoughts may sound like a good idea, but there is difficulty with arousal.

**Q: Why have I lost interest in sexual activities?**

A: The diagnosis of cancer has a profound impact on one's life. Initially, you may only be concerned with your diagnosis and how it will affect you. Fear, doubt, worry, anxiety, and sadness can consume your thoughts. In addition, if you are having pain, or feel tired or sick from your treatments, you may lose interest in sexual activities. This is not uncommon.

**Q: Is it safe to have sexual relations with my partner while taking chemotherapy?**

A: Yes. However, a few studies suggest chemotherapy by-products may be present in semen. To protect your partner from these, you might consider using a condom.

**Q: Is it safe to have sexual relations with my partner while taking radiation treatment?**

A: This depends on the type of radiotherapy you are receiving. Your body is not radioactive after receiving radiation from an external source, such as a machine. If another type of radiotherapy is being used, ask your doctor and follow that advice.

**Q: Will I still be attractive to my partner?**

A: Remember, you are still the same person you were prior to receiving a cancer diagnosis. Serious illness can be unsettling, but it often brings couples closer together. Keep communication open between you and your partner; discuss any concerns you may have. Your partner is undoubtedly very worried about you.

**Q: If I lose my hair due to cancer treatment, will it only involve the hair on my head?**

A: If your cancer treatment involves hair loss, this typically involves all body hair, including your eyebrows, eyelashes, and nose hair, as well as the hair in your genital area.



**Q: How can I deal with all of this?**

**A:** The following are suggestions that may help you cope with concerns related to sexuality:

- Ask questions, even if you feel reluctant.
- Communicate with your partner and keep an open mind about sexual expression.
- Consider counseling and other supportive care.
- Plan sexual activity for the time of day when you feel best. If you plan on taking pain medicine, be sure to take it an hour before so that it will be in full effect during intercourse.
- Let your partner know if any kind of touching causes pain. Show your partner ways of touching that do not cause discomfort.
- Find a position for touching or intercourse that puts as little pressure as possible on the sensitive or painful areas of your body.
- Empty your bladder before touching. Feelings of fullness can interfere with sexual relaxation and pleasure.
- Wash your hands before and after sexual activity to help prevent infection.
- Urinate after sexual activity to eliminate bacteria that may cause urinary tract infections.
- Avoid sexual contact with people who have infectious diseases (colds, flu, or cold sores) or sexually transmitted diseases.
- Tell your partner how you feel. There is no right or wrong.
- If you have an ostomy, you may consider wearing a T-shirt, sexy garment, scarf, or cummerbund over the site.
- Learn new ways to give and receive sexual pleasure. There may be times when sexual intercourse is not possible. However, cuddling and being physically close may still bring pleasure. No matter what kind of treatment you may have had, the ability to feel pleasure from touching almost always remains.



## **SLEEP DISTURBANCES**

People undergoing cancer treatment may experience changes in normal sleep patterns for a number of reasons including: response to medications, discomfort, alteration in normal activity patterns, hospitalizations and emotional distress.

### **Important signs and symptoms – please contact your doctor with the following:**

- Inability to fall asleep or maintain sleep.
- Changes in sleep patterns.
- Interference in your ability to perform daily activities.
- Mood swings.

### **Ways to assist with your care:**

- Back rubs or massages may be relaxing.
- Create a quiet environment in which to sleep. Decrease noise, dim lights, adjust room temperature, and keep bedding and pillows clean, dry, and wrinkle free.
- Avoid caffeine before bedtime.
- Minimize daytime naps.
- Exercise daily.
- Listen to relaxation tapes or peaceful music.
- Take a relaxing shower or warm bath.
- If the above interventions are not helpful, ask your doctor or other healthcare team member for further suggestions.



## WHITE BLOOD CELLS

White blood cells help protect the body by fighting bacteria that cause infection. A white blood cell count “with differential” provides a measurement of the different types of white blood cells and gives your healthcare team important information about your body’s ability to fight infection. White blood cell counts reach the lowest level, or “nadir”, about 7-14 days after each chemotherapy treatment. Your doctor will monitor your blood counts at specific intervals to determine your levels. If your white blood cell count is low, you are more susceptible to an infection. We will let you know when you are at your highest risk for infection, but also want you to take precautions daily to protect yourself. Sources of infection include other people you come in contact with, as well as, your own body.

**URGENT signs and symptoms – please contact your doctor immediately with the following:**

- Shaking chills, with or without fever.
- New onset of severe pain.
- Sudden spike in temperature greater than 100.5 degree Fahrenheit orally.

**Important signs and symptoms – please contact your doctor with the following:**

- Cough or shortness of breath.
- Nasal drainage that is not clear.
- Sore throat.
- Painful or frequent urination, change in urine color and/or odor.
- Pain with bowel movements.
- Pain, redness, swelling, or heat around an IV site, incision, or wound.

**Ways to assist with your care:**

- Look in your mouth for signs of infection. Perform frequent mouth care. See the page on Mouth Sores and Mucositis.
- Keep your skin clean. Avoid cuts and scratches. Report any changes in skin including rashes, sores, and cuts.
- Wash your hands frequently and use antibacterial agents when washing is not possible.
- Wear gloves while doing dishes.
- Shave with an electric razor.
- Use a moisturizing lotion.
- If you have hemorrhoids, ask your nurse or doctor for advice before treating.
- Check with your doctor before having dental work.
- Monitor your temperature daily. Avoid large crowds and people who are infectious.



- Call your doctor **before** taking medications to reduce fever.
- Ask your healthcare team about food safety and any necessary diet restrictions when your white blood cells are low.





**MEDICATION LOG**

<b>MEDICINE PRESCRIBED</b>	<b>PURPOSE</b>	<b>DOSE</b>	<b>STARTED</b>	<b>STOPPED</b>	<b>NOTES</b>
<b>OVER THE COUNTER Supplements, vitamins, herbals</b>	<b>PURPOSE</b>	<b>DOSE</b>	<b>STARTED</b>	<b>STOPPED</b>	<b>NOTES</b>



### PATIENT/CAREGIVER SCHEDULE

TIME	ACTIVITY	LOG OF SYMPTOMS/ISSUES
7 AM		
8 AM		
9 AM		
10 AM		
11 AM		
12 PM		
1 PM		
2 PM		
3 PM		
4 PM		
5 PM		
6 PM		
7 PM		
8 PM		
9 PM		
10 PM		
11 PM		
12 – 6 AM		



**PERSONAL JOURNAL & WEEKLY TRACKER**

**Week of:** \_\_\_\_\_

*Symptoms and side effects:*

*Questions for healthcare team:*

*Personal notes:*

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**Week of:** \_\_\_\_\_

*Symptoms and side effects:*

*Questions for healthcare team:*

*Personal notes:*

---

**Week of:** \_\_\_\_\_

*Symptoms and side effects:*

*Questions for healthcare team:*

*Personal notes:*

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### MEDICAL BILLS AND HEALTH INSURANCE LOG

DATE TIME	PHONE NUMBER	REASON FOR CALL	WHO YOU TALKED TO	NOTES



## DEFINITIONS

<b>Acute</b>	Sudden, quick.
<b>Adrenal Gland</b>	One of a pair of small glands, each of which sits on top of one of the kidneys. These glands produce hormones that help control heart rate, blood pressure, the way the body uses food, and other vital functions.
<b>Alopecia</b>	Hair loss.
<b>Alternative Therapies</b>	Treatments such as acupuncture, chiropractic care, homeopathy, massage, meditation and/or nutrition, which may reduce stress or boost the immune system.
<b>Androgen</b>	Male sex hormone.
<b>Anemia</b>	Shortage of red blood cells, causing tiredness, paleness, and shortness of breath.
<b>Anterior</b>	At or near the front.
<b>Anti-Androgen</b>	Hormonal therapy drug that works by attaching itself to proteins on the surface of the cancer cell and blocking testosterone from entering the cancer cell.
<b>Antibiotic</b>	Medicine to treat infections caused by bacteria.
<b>Antiemetic</b>	Medicine to prevent or lessen nausea or vomiting.
<b>Axilla</b>	The armpit – lymph nodes in the armpit are called the axillary nodes.
<b>Bacteria</b>	Organisms that grow in body tissue and cause infections. Staph and Strep infections are bacterial infections.
<b>Basal Cell Carcinoma</b>	The most common form of skin cancer. Grows slowly and rarely spreads.
<b>Baseline Mammogram</b>	A first mammogram which includes two views of each breast and is used for comparison with future mammograms.
<b>Benign Tumor</b>	An abnormal growth that is not cancer and does not spread to other body areas.



<b>Biopsy</b>	Tiny piece of body tissue removed and examined under the microscope; used to make a diagnosis. Please also see Excisional Biopsy, Incisional Biopsy, and Stereotactic Biopsy for more specific information.
<b>Bladder</b>	The balloon-shaped pouch of thin, flexible muscle in which urine is temporarily stored before being discharged through the urethra.
<b>Bladder Neck</b>	Area of thickened muscle fiber where the bladder joins the urethra. Acting on signals from the brain, bladder neck muscles can either tighten to hold urine in the bladder or allow urine out and into the urethra.
<b>Blasts</b>	Young or immature white blood cells not commonly seen in the blood; may indicate leukemia cells in the bone marrow.
<b>Blood Count</b>	Examination of a blood specimen in which the number of white blood cells, red blood cells and platelets are determined.
<b>Bone Marrow</b>	Soft tissue inside the bones where blood cells are made.
<b>Bone Marrow Transplant</b>	Treatment technique using high dose chemotherapy in which bone marrow is destroyed and later replaced.
<b>Bone Scan</b>	X-ray test that uses an injected, short-lived radioactive dye to find tumors in the bones or check the function of a certain body part.
<b>Brain Scan</b>	Technique in which radioactive dye is injected into a vein, so that images of the brain can be recorded.
<b>Calcifications</b>	Very small calcium deposits in the breast tissue and elsewhere that can be seen on an x-ray or mammogram.
<b>Cancer</b>	An abnormal growth that can invade nearby structures and spread to other parts of the body and may be a threat to life.
<b>Carcinogens</b>	Any substance that initiates or promotes the development of cancer.
<b>Carcinoma</b>	Cancer that begins in the skin or in tissues that line or cover body organs.
<b>Central Venous Catheter</b>	Long, soft tube inserted into a large vein that leads into the heart. These catheters are also known as Broviac, Hickman, or Groshong catheters and are used to sample blood or give medications.
<b>Chemotherapy</b>	Treatment of cancer with certain drugs that may kill cancer cells.



<b>Chronic</b>	Lasting a long time. Chronic diseases develop slowly.
<b>Clinical Trials</b>	Carefully designed and monitored studies of new methods of treating cancer.
<b>Combination Chemotherapy</b>	Giving more than one chemotherapy medicine during the treatment plan.
<b>CT or CAT Scan</b>	Computerized Axial Tomography. This is an x-ray test that uses a special machine that rotates around the patient, taking cross-section pictures of the body. This allows the doctor to see organs inside the body in great detail.
<b>Cyst</b>	An abnormal sac-like structure that contains gas, fluid, or semisolid material; may be benign or malignant.
<b>Cystectomy</b>	Surgical removal of the bladder.
<b>Cystoscope</b>	A narrow, tube-like instrument fitted with lenses and a light passed through the urethra to look inside the bladder. The procedure is called a cystoscopy.
<b>Cytology</b>	The examination of cells obtained from the body tissue or fluids, especially to establish if they are cancerous.
<b>Dietitian</b>	Healthcare provider who guides people in planning their food choices to ensure they get proper nutrition. The dietitian is an excellent resource for people in cancer therapy.
<b>Digital Rectal Exam (DRE)</b>	Insertion of a gloved, lubricated finger into the rectum to feel the prostate and check for any abnormalities.
<b>Diverticulum</b>	A pouch or sac in the lining of the mucous membrane of an organ.
<b>Echocardiogram (ECHO)</b>	Test to evaluate the heart's function using sound waves. It gives an indication of the heart's strength.
<b>Electrocardiogram (EKG)</b>	Test to study the electric signals of the heart.
<b>Electrolytes</b>	Chemicals in the body fluids that result from the breakdown of salts, including potassium, magnesium, and chloride. The kidneys control the amount of electrolytes in the body. When the kidneys fail, electrolytes get out of balance, causing potential health problems.



<b>Endoscopy</b>	Any procedure that uses a hollow tube-like instrument to visualize and biopsy otherwise inaccessible areas of the body such as stomach, colon or lung.
<b>Excisional Biopsy</b>	Tissue removal by surgical techniques which generally results in total removal of the abnormality.
<b>Extravasation</b>	The unintended leakage of an irritating medicine outside a vein, causing a chemical burn in the skin and surrounding tissue.
<b>Field</b>	The area of the patient's body which will be receiving radiation therapy.
<b>Five-Year-Survival</b>	Term commonly used as the statistical basis for successful treatment of cancer.
<b>Flank</b>	The area of the side of the body between the rib and hip.
<b>Fungus</b>	An organism larger than bacteria that causes serious infections when there is a problem with the immune system.
<b>Gene</b>	The basic unit capable of transmitting characteristics from one generation to another.
<b>GI</b>	Gastrointestinal tract; the digestive system – the stomach and intestines.
<b>Gland</b>	A group of cells which have the ability to manufacture a substance which is used in some other part of the body.
<b>Groin</b>	The area where the upper thigh meets the lower abdomen.
<b>Groshong Catheter</b>	A specific type of central venous catheter.
<b>GU</b>	Genitourinary tract; this system includes the sex organs outside the body, as well as the kidneys, ureters, bladder, and urethra inside the body.
<b>Hematuria</b>	Blood in the urine, which can be a sign of a kidney stone or other urinary problems. Gross hematuria is blood that is visible to the naked eye. Microscopic hematuria cannot be seen, but is detected on a urine test.
<b>Hickman Catheter</b>	A specific type of central venous catheter.
<b>Hormonal Therapy</b>	Treatment that adds, blocks, or removes hormones.



<b>Hospice</b>	A philosophy and delivery of care emphasizing comfort, peace of mind, and control of symptoms, usually invoked when life expectancy is short.
<b>Human Papilloma Virus (HPV)</b>	One of the most common causes of sexually transmitted disease.
<b>Hydronephrosis</b>	Swelling of the top of the ureter, usually because something is blocking the urine from flowing into or out of the bladder.
<b>Hypothalamus</b>	The area of the brain that controls body temperature, hunger, and thirst.
<b>Immune System</b>	One of the body of defenses against infection and foreign material; includes white blood cells, spleen, lymph nodes, and thymus.
<b>Immunosuppression</b>	When the immune system defenses are weaker than usual, increasing infection risk.
<b>Immunotherapy</b>	Treatment to stimulate or restore the ability of the immune system to fight infection and disease.
<b>Implantable Port</b>	Device that is surgically placed entirely under the skin, usually on the chest or abdomen. It can be used to sample blood or give medication.
<b>In Situ</b>	In place; localized and confined to one area. A very early stage of cancer.
<b>Incisional Biopsy</b>	Tissue removal by surgery, generally resulting in partial removal of abnormality.
<b>Inflammatory</b>	Characterized or caused by swelling, redness, heat and/or pain produced in an area of the body as a result of irritation, injury, or infection.
<b>Intramuscular (IM)</b>	An injection into muscle, usually in the thigh or upper arm.
<b>Intrathecal (IT)</b>	An injection into the spinal canal.
<b>Intravenous (IV)</b>	An injection into a vein.
<b>Invasive</b>	Having or showing a tendency to spread from the point of origin to adjacent tissue as some cancers do. Involving cutting or puncturing the skin or inserting instruments into the body.
<b>Isodose Plan</b>	Computer-generated picture of therapeutic radiation distribution within the patient's body.



<b>Kidney</b>	One of two bean-shaped organs that filter wastes from the blood and discharge the waste products in urine. The kidneys are located near the middle of the back. The kidneys drain urine to the bladder through tubes called ureters.
<b>Laparoscopic Surgery</b>	Surgery performed with a tube-like instrument inserted through small cuts. Using a small video camera and a few customized instruments, the surgeon can work in many body cavities without dividing skin from muscle, thus reducing recovery time and complications.
<b>Leukemia</b>	Cancer of the blood-forming tissues – overproduction of abnormal white blood cells.
<b>Linear Accelerator</b>	A sophisticated treatment machine which directs a precisely-defined beam of radiation at the cancer site to either destroy the cancer cells or retard their growth.
<b>Lumbar Puncture</b>	This procedure is also called a Spinal Tap. The doctor inserts a needle into the back between two spinal bones (spinal canal) to remove a sample of the clear fluid that surrounds the brain and spinal cord. Medicines may be given through the same needle.
<b>Lumpectomy</b>	Surgical removal of a cancerous lump and surrounding tissue without removing the entire breast.
<b>Lymph Nodes/Glands</b>	Part of the body’s immune system that fights infection. Located mostly in the armpit, neck, and groin areas.
<b>Malignant Tumor</b>	Mass of cancer cells. A malignant tumor may invade surrounding tissues or spread to distant areas of the body.
<b>Mastectomy</b>	Surgical removal of all or part of a breast and sometimes underlying muscles.
<b>Medicaid</b>	A federal program that reimburses hospitals and doctors for providing healthcare to qualifying people who cannot afford medical expenses.
<b>Medicare</b>	A program under the U.S. Social Security Administration that reimburses doctors and hospitals for healthcare provided to qualified patients over age 65.
<b>Melanoma</b>	Type of skin cancer. Melanoma can be very aggressive if not detected early.



<b>Metastasis</b>	Cancer cells that spread from the original tumor site to other parts of the body.
<b>Magnetic Resonance Imaging (MRI)</b>	A test that uses a magnetic field instead of x-rays to see inside the body; useful in examining the brain and solid tissue.
<b>Mucositis</b>	Also called Stomatitis. The mouth or lip lining is inflamed, red and has open sores; sometimes caused by chemotherapy.
<b>Multimodal</b>	Combined methods of treatment such as surgery and chemotherapy.
<b>MUGA Scan</b>	An imaging procedure that evaluates the function of the heart.
<b>Neoplasm</b>	Any new abnormal growth; may either be benign or malignant.
<b>Neutropenia</b>	A shortage of neutrophils in the blood, increasing the risk of infection.
<b>Neutrophils</b>	Also called granulocytes, segs, or polys; most important type of white blood cell.
<b>Non-seminomatous</b>	Classification of testicular cancer that arises in specialized sex cells called germ cells.
<b>Non-steroidal</b>	Drug not containing or being a steroid. Ibuprofen is an example.
<b>Oncology/Oncologist</b>	The study, diagnosis and treatment of cancer; an oncologist is a physician who specializes in the treatment of cancer. A Medical Oncologist oversees your chemotherapy or biotherapy treatments, and a Radiation Oncologist oversees your radiation treatments. Oncology nurses help carry out your cancer treatment plans.
<b>Opportunistic Infection</b>	Caused by germs that do not usually cause infection, except when cancer or cancer treatment changes the immune system.
<b>Orthovoltage Unit</b>	Machine which produces radiation of lower energy to treat cancer which occurs in closer proximity to the skin's surface.
<b>Palpable</b>	Able to be felt by the hands, especially during medical examination.
<b>Pathologist</b>	A doctor who is skilled in identifying the cause and progress of disease by examination of tissue and fluid from the body.
<b>Peripheral</b>	Near the surface of an organ.



<b>PET Scan</b>	A radiographic study that indicates areas of increased cellular activity; helpful in staging cancers.
<b>Petechiae</b>	Tiny red dots on the skin caused by a shortage of platelets.
<b>Pheresis Catheter</b>	A specific type of central venous catheter used in stem cell transplantation.
<b>Physical Therapist</b>	Medical professional trained in the use of physical treatment (for example, exercise, massage).
<b>Platelet</b>	Cell found in the blood that is necessary for blood clotting.
<b>Posterior</b>	Situated at the rear or behind something.
<b>Prognosis</b>	A prediction of the course of the disease; the future prospects for the patient.
<b>Prostate</b>	In men, a walnut-shaped gland that surrounds the urethra at the neck of the bladder. The prostate supplies fluid that goes into semen.
<b>Prostate Seed Implant</b>	A form of brachytherapy for specific prostate cancer.
<b>Prosthesis</b>	Artificial replacement for a missing part of the body such as a breast or limb.
<b>Protocol</b>	The doctor's treatment plan giving the most up-to-date care for a disease.
<b>Prostate-Specific Antigen (PSA)</b>	A protein made only by the prostate gland. High levels of PSA in the blood may be a sign of prostate cancer.
<b>Radiation Therapist</b>	Medical professional specializing in the use of radiation to treat cancer.
<b>Radiologist</b>	Physician who specializes in reading and explaining diagnostic x-rays of areas inside your body and performs specialized x-ray procedures.
<b>Randomization</b>	Chance selection of the treatment arm of a protocol.
<b>Rectal Ultrasound</b>	A diagnostic test that uses very high frequency sound waves to produce an image of the rectum.
<b>Recurrence</b>	The reappearance of cancer after a disease-free period.
<b>Remission</b>	Complete or partial disappearance of the signs and symptoms of disease in response to treatment. The period during which a disease is under control.



<b>Resectoscope</b>	A tube-shaped instrument used by the urologist to remove a tumor from the bladder.
<b>Sarcoma</b>	A form of cancer that arises in the supportive tissues: bone, cartilage, fat or muscle.
<b>Scrotal</b>	Relating to the scrotum; the sac of tissue that hangs below the penis and contains the testicles.
<b>Semen</b>	Also known as Seminal Fluid or Ejaculate Fluid. Thick, whitish fluid produced by the glands of the male reproductive system; carries the sperm (reproductive cells) through the penis during ejaculation.
<b>Sentinel Lymph Node</b>	The lymph node closest to the primary tumor. Cancer cells tend to appear in the sentinel node before spreading to other lymph nodes.
<b>Simulator</b>	Machine which aids physicians in locating the cancer and establishing parameters for actual treatment on the linear accelerator. Similar to a dry run for radiation therapy, it helps determine field size, treatment distance and angles.
<b>Social Worker</b>	Professional who is trained to provide counseling and practical assistance to meet your specific needs. The social worker can provide counseling to help you and your family cope.
<b>Spinal Tap</b>	This procedure is also called a Lumbar Puncture. The doctor inserts a needle into the back between two spinal bones (spinal canal) to remove a sample of the clear fluid that surrounds the brain and spinal cord. Medicines may be given through the same needle.
<b>Spleen</b>	An organ located in the left side of the abdomen. Helps fight infection.
<b>Stage</b>	Classification of the progress of a disease. The size, place, or spread of the disease are taken into consideration. Stages usually begin at Stage 1 and go to Stage 4.
<b>Stem Cell</b>	A master blood cell found in the bone marrow.
<b>Stem Cell Transplant</b>	Alternative to bone marrow transplant to treat some cancers.
<b>Stereotactic Biopsy</b>	Removal of small samples of breast tissue for microscopic evaluation using a hollow needle which is precisely guided to the correct location via X-rays and computer coordinates.



<b>Steroid</b>	An organic fat-soluble compound.
<b>Stomatitis</b>	Also called Mucositis. The mouth or lip lining is inflamed, red and has open sores; sometimes caused by chemotherapy.
<b>Teratoma</b>	A tumor comprised of various tissues not normally found together at the site.
<b>Testosterone</b>	Male hormone responsible for sexual desire and for regulating a number of body functions.
<b>Thrombocytopenia</b>	Shortage of platelets in the blood, increasing risk of bleeding or easy bruising.
<b>Tissue</b>	Group of cells in an organism that are similar in form and function.
<b>Transitional Cell Carcinoma</b>	A type of cancer that develops in the lining of the bladder, ureter, or renal pelvis.
<b>Transrectal Ultrasound</b>	A test using sound waves to create an image of an organ or gland to visually detect abnormalities.
<b>Treatment Arm</b>	A check of one's treatment plan against another treatment plan within the same protocol; details such as test and treatment.
<b>Tumor</b>	Abnormal tissue swelling or mass; may be either benign or malignant.
<b>Tumor Board</b>	Panel of experts in radiology, oncology, surgery and/or pathology who convene to make treatment recommendations.
<b>Tumor Markers</b>	A substance in the body that may be associated with the presence of cancer.
<b>Ultrasound</b>	Also called a Sonogram; a test that uses sound waves to detect abnormalities or changes in certain internal organs and structures.
<b>Ureter</b>	One of two tubes that carry urine from the kidneys to the bladder.
<b>Urethra</b>	In males, this narrow tube carries urine from the bladder to the outside of the body and also serves as the channel through which semen is ejaculated. It extends from the bladder to the tip of the penis. In females, this short, narrow tube carries urine from the bladder to the outside of the body.



<b>Urethral Stricture</b>	Scarring of tissue that causes narrowing or blockage of the canal leading from the bladder, discharging the urine externally.
<b>Virus</b>	A tiny organism (germ), smaller than bacteria; can cause infections.



**PATIENT AND FAMILY QUESTIONNAIRE**

Your evaluation of our care is important to us and this guidebook is designed to help you and your family. Please take a moment to complete the questions below, by circling the best answer for you. You may mail it to us or simply hand to any member of the Billings Clinic Cancer Center healthcare team. With your input, we will continue to grow and provide you with information that is of value to you.

Thank you.

1. Overall, I found the guidebook to be:

Very helpful      Helpful      Somewhat helpful      Not helpful

2. Did you receive this guidebook early in your diagnosis?

Yes      No      Not sure

3. Would you recommend this guidebook to others?

Yes      No      Not sure

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Return to:**  
Cancer Care Navigator  
Billings Clinic, P.O. Box 37000, Billings, Montana 59107



## Integrative Medicine

The Billings Clinic Cancer Center offers comprehensive integrative medicine services for patients with cancer and their family members. The goal is to integrate therapies and provide education to address the emotional and social needs of cancer patients, improve quality of life, encourage good nutrition, and alleviate suffering. The focus is to facilitate healing for each patient through individual and group programs.

A healthcare team including an oncology provider, a naturopathic physician, nutritionist, and social worker can create a plan of care for each individual that will complement their current treatment (e.g. chemotherapy, radiation therapy).

Complementary therapies such as naturopathic medicine, nutrition counseling, yoga, and qi gong (pronounced “chee-gong”) are available by individual appointment at the Billings Clinic and other locations.

### Cancer Survivor Program

Additional support is available through the *Cancer Survivor Program*, which is a small group that meets for six weeks on Tuesdays at the Research Center.

The *Cancer Survivor Program* will strengthen your body, mind, and spirit as you deal with your cancer. Gentle movement classes can help your body feel better. A supportive group process with a chaplain and social worker offers participants an opportunity for growth and healing of body, mind, and spirit. You will also learn more about improving your health with nutrition, then enjoy a delicious dinner. When you are feeling up to it, we encourage you to participate in this program.

Your Cancer Care Navigator has information regarding the fee for this program. If you cannot afford the fee, any part or all may be purchased as a “gift certificate” by friends, family, co-workers, etc. Financial assistance is also available to cover part or all of the fee.

#### Cancer Survivor Program Schedule:

3:30 p.m.	Check in
4:00 p.m.	Mind-Body Wellness
5:00 p.m.	Group Process Therapy
6:00 p.m.	Dinner

To register, or for more information about the program, please call your Cancer Care Navigator. Registration should be done at least 10 days in advance of the next program.



## *Descriptions of Integrative Medicine Therapies*

### **Acupuncture**

- ◆ **Acupuncture** is the process of applying disposable, ultra-thin needles to specific points on the body to stimulate the nervous system to release certain chemicals in the brain. Acupuncture can be especially helpful in alleviating nausea caused by chemotherapy agents. Acupuncture also helps fatigue and anxiety, and is an effective remedy for controlling and easing cancer-related pain.
- ◆ **Acupressure** is a traditional Chinese technique employing hand pressure to specific points on the body to deeply relax muscles and promote good blood circulation. Acupressure can help relieve pain, reduce stress, and improve physical well-being.

### **Naturopathic Medicine**

Naturopathy blends centuries-old knowledge of natural, non-toxic therapies with current advances in understanding of health. Our naturopathic physician will work with you to tailor a treatment plan aimed at improving and maintaining your overall health. This may include reducing the side effects of conventional cancer treatments. The goal of a naturopathic physician is to employ therapies (such as botanical medicine, aromatherapy, vitamins and minerals, guided imagery, etc) that support and promote the body's natural healing process, leading to the highest state of wellness.

### **Nutrition**

Loss of appetite is one of the most common side effects of cancer and cancer therapy. Your appetite may be affected by illness, nausea, vomiting, pain, fatigue, anxiety, depression, or a combination of several symptoms. Because of lowered resistance and immune function during treatment, it is vital to maintain nutritional intake. Nutritional counseling is available with a dietitian who specializes in oncology. This counseling includes recommendations for healthful eating to encourage optimal healing and well-being, as well as food preparation techniques and the use of culinary herbs to counter symptoms such as nausea and indigestion. Proper nutrition boosts and sustains the immune system and helps reduce the side effects of treatment.

### **Massage Therapy**

Massage involves the therapeutic kneading of muscles with long, flowing hand movements to relieve muscular tension, stimulate circulation, and induce feelings of deep relaxation and tranquility. Massage therapy can help you manage pain, alleviate some of the side effects of cancer treatment (such as chemotherapy), promote relaxation, and reduce mental, emotional, and physical stress.



## Support Groups

Support groups help foster networking opportunities. Patients and family members find amazing strength from like-minded individuals. They also benefit from the knowledge gained from previous survivors who have preceded them through our doors. A landmark 1989 study by Stanford psychiatrist David Spiegel found that women with metastatic breast cancer who participated in a support group lived longer than those who did not. The group support was seen to protect against or lessen stress. Pastoral Care provides patients and their families support while they go through the many emotions and transitions accompanying cancer and the cancer treatment process. Social and emotional health and support are essential components to physical healing.

## Mind-Body Wellness

- ◆ **Meditation** is the experience of being fully present in the moment as a way to calm the mind and relieve anxiety and distress. Meditation commonly focuses on breathing, on relaxing the body, or on visual imagery. Virtually any life activity, such as walking, can be used as a focus for enhancing serenity and vitality.
- ◆ **Yoga** is a philosophy and exercise system that combines movement and simple poses with deep breathing and meditation to promote healing and relaxation and to reduce fatigue. The American Cancer Society notes that yoga, which it describes as a “complementary therapy ... not a treatment for any disease”, can “reduce levels of stress and bring about feelings of relaxation and well-being ... [and] enhance quality of life for some patients with cancer.”
- ◆ **Chair Yoga** is a combination of yoga postures and breath work done in the comfort of a seated position, or using a chair for balance and support. This class is for individuals recovering from medical treatment or persons whose physical condition, restricted mobility, or age limits participation in other yoga classes.
- ◆ **Qi Gong** combines movement and meditation and can be practiced by individuals of almost any age or fitness level. Regular practice of Qi Gong can reduce stress, increase stamina, establish balance, improve sleep, and bring a sense of harmony. Controlled but non-randomized studies in China have reported potential benefits in reduction of treatment side effects and improvement in general health for patients with cancer and other health problems. Qi Gong is designed to address specific health issues of cancer survivors such as increasing range of motion, improving lymphatic flow, reducing surgical adhesions, and promoting flexibility and strength.

**For more information, please contact your nurse or a Cancer Care Navigator.**