Medical Oncology

Please do not hesitate to contact the **Medical Oncology Office** with any questions or concerns. We are here to help, our goal is to make this process as easy as possible for you and your family.

Medical Oncology Office	425.297.5560
Monday-Friday 8 a.m. to 5 p.m.	
Medical Oncology Fax	425.297.5575
On-Call Provider (After Hours)	425.297.5560
Financial Counselors	425.257.1469

Oral Chemotherapy Process Getting Started

- The provider will give your prescription to the Oral Chemo Team for processing.
- Generally, it takes 1-4 weeks for the first shipment of medication to arrive.
- Most oral chemotherapy medications cannot be filled at local pharmacies. The Oral Chemo Team will fax your prescription to a specialty pharmacy.
- The specialty pharmacy will verify insurance, "prior authorization," copay for the medication.
- Some insurance plans require the use of specific pharmacies, and some oral chemo medications may only be filled through certain pharmacies.

Please notify the Oral Chemo Team if you have a change in insurance.

- The specialty pharmacy will contact you to discuss the copay and whether copay assistance is needed. If copay assistance is needed, the Oral Chemo Team will work with you, your pharmacy, patient assistance foundations, and/or manufacturers as needed.
- The specialty pharmacy will contact you to set up delivery of the medication.

Please advise the pharmacy to send the first shipment to our office

- □ Subsequent medication deliveries may be sent to your home or our office per your preference.
- Once the medication has arrived in our office, a scheduler will contact you to set up any needed labs and an office visit for an education specific to the oral chemotherapy.
 - The provider will give you the medication during the office visit.

- If the pharmacy sends the first delivery to your home in error:
 - □ Bring the medication with you to the education office visit.
 - Do not begin taking the medication until you have completed an oral chemo education with a provider or nurse.
- If a change in specialty pharmacy is needed, please call the Oral Chemotherapy Team as soon as possible for expedited processing.

Refills

Please contact your specialty pharmacy directly to initiate a refill of your medication.

- The pharmacy will contact our office if additional refills are required.
- Special case: A Celgene survey for both patients and providers must be completed for each refill of Revlimid, Pomalyst, and Thalomid.

Oral Chemotherapy

The use of oral chemotherapy agents is increasing due to the rapid growth in the number of oral agents.

Oral chemotherapy is generally considered an effective, convenient, and less invasive treatment option. However, understanding and anticipating possible barriers associated with oral chemotherapy will help arm you with the tools to overcome potential challenges. Since you will administer the drug in your home instead of in the presence of healthcare professionals you need to understand the significance of your role in maintaining safety, adherence, communication, and monitoring to ensure the best possible experience and outcome.

Things to consider before you begin:

Convenience & Quality of Life

- Medication taken at home
- More time to enjoy family, friends, and activities
- Flexibility for travel

Financial

- Less transportation coordination and costs
- Less time off work
- No childcare costs

Less Invasive

- No peripheral or central venous (IV) access needed
- Decreased risk for infection



Safety Issues

Storage, handling, disposal

Responsible for proper drug administration and taking

- · Right time, right dose
- Food/medication interactions
- Misinterpretation of instructions
- Dosing complexity
- Side effects

Tips and Tricks for Oral Chemo

Cost of Medication

Please see "Oral Chemotherapy Process".

Storage/Handling/Disposal

- Refer to the manufacturer insert and/or ask the pharmacist about storage requirements.
 - Some medications are temperature or light-sensitive.
- Keep medications stored where children and pets cannot gain access.
- Launder linens soiled with bodily fluids separate from non-soiled linens.
- Contact a specialty pharmacist for disposal recommendations.

Administration

- Know proper administration time and dosing of oral chemo and any other medications.
 - ♦ Take with food or on an empty stomach.
- Know which foods, supplements, and/or medications (including over-the-counter) interact with medication.
 - ♦ For example, grapefruit, St. John's wort, etc.
- Do not chew, crush, cut, or dissolve tablets or capsules.
- Caregivers should wear gloves when handling medication.
- Always wash hands after handling medication.

Adherence/Taking Your Medication

- Take medication at the proper time and dose prescribed.
- Do not modify the frequency or dose of medication without talking with your provider.
 - ♦ Call our office for troublesome side effects or any concerns.
- Use calendars, pill boxes, and alarms as reminders.
- Keep all lab and office visit appointments.



My Oral Chemotherapy

Medications (dose, frequency, time, and # of cycles):	
Blood Monitoring (Lab Draws):	
Frequency of Provider Visits:	
Other Precautions:	
Specialty Pharmacy:	
Phone:	
Financial Assistance:	
Phone:	



Immunotherapy Reducing Skin Reactions

What can I expect?

- The treatment you are receiving can cause skin changes such as redness, acne-like rash, itchiness, peeling and cracked skin.
- Skin changes are most common on the face, neck, and trunk.
- You may also experience cracking in the skin around your nails.
- * Skin changes typically start within 2 weeks of starting therapy.
- * The rash will generally clear up 2-3 months after treatment is completed.
- * Skin reactions can range from mild to life-threatening. Contact your healthcare provider right away if the rash worsens or changes in appearance.

What can be done to prevent the rash associated with my treatment?

- To help prevent rashes you may receive a prescription for oral antibiotics and topical hydrocortisone cream. The cream should be applied to the rash area as prescribed. You should start using these the day you start therapy and continue for 8 weeks or as directed by your healthcare provider.
- Because many antibiotics can make your skin sensitive to the sun you should use sunscreen with SPF 30 or higher every day.

Supportive measures to prevent or minimize skin reactions:

- Use cool or lukewarm water for bathing.
- Generously apply moisturizers after bathing and throughout the day. Moisturizers should be alcohol-free.
- Use alcohol-free, fragrance-free, and dye-free soaps, shampoos, body washes, and laundry detergents.
- Use hypoallergenic makeup.
- Avoid any skin products that contain alcohol.
- Avoid over-the-counter acne medications such as benzoyl peroxide as these can be drying to the skin.
- Use an electric razor to shave. Avoid excessive beard growth.
- Avoid sun exposure and use sunscreen and/or protective clothing.
- Remain well hydrated.



Central Lines

A "central line" or "central catheter" is a tube that is placed into a patient's large vein, usually in the neck, chest, arm, or groin. The catheter is often used to draw blood or give fluids or medications. A bloodstream infection can occur when bacteria or other germs travel down a "central line" and enter the blood. If you develop a catheter-associated bloodstream infection you may become ill with fevers and chills or the skin around the catheter may become sore and red.

What types of central venous catheters are there?

There are several types of central venous catheters. Healthcare providers use the type that is best for each patient's case.

- A peripherally inserted central catheter (PICC) line is placed into a vein in the arm. A
 tunneled catheter is surgically placed into a vein in the chest or neck and then passed
 under the skin. One end of the catheter comes out through the skin so medicines can be
 given right into the catheter.
- An implanted port is similar to a tunneled catheter, but an implanted port is placed entirely under the skin. Medicines are given by a needle placed through the skin into the catheter. A port is not as visible and does not require daily care.

What are some of the things that hospitals and clinics are doing to prevent catheter-associated bloodstream infections?

To prevent catheter-associated bloodstream infections, when inserting, doctors and nurses will:

- Choose a vein where the risk for infection is lower.
- When placing a catheter, providers will use sterile techniques, including draping the
 patient and wearing a mask, sterile gown, and gloves along with prepping the skin with
 a cleansing agent.
- If hospitalized, patients are given daily baths to prevent infections due to environmental risk.
- During treatment or hospitalizations, clean their hands and clean the catheter injection ports for 10-15 seconds with an antiseptic solution before using the catheter.
- Decide every day if the patient still needs to have the catheter.
- When using the catheter to administer medications, other IV therapies, or draw blood, providers will use aseptic techniques.

What can I do to help prevent a catheter-associated bloodstream infection?

- Ask your doctors and nurses to explain why you need the catheter and how long you will have it.
- Make sure that all doctors and nurses caring for you clean their hands with soap and water or an alcohol-based hand rub before and after caring for you.
- If the dressing comes off or becomes wet or dirty, alert staff immediately.
- Inform staff if the area around your catheter is sore or red. Speak up if a healthcare provider does not scrub the injection port for 10-15 seconds prior to using.
- Do not let family and friends who visit touch the catheter or the tubing.

What can I do to help prevent a catheter-associated bloodstream infection?

If you go home with a catheter, your doctors and nurses will explain everything you need to know about taking care of your catheter.

- Make sure you understand how to care for the catheter. For example, ask for instructions on showering or bathing.
- Make sure you know who to contact if you have questions or problems after you get home.
- Make sure you wash your hands with soap and water or an alcohol-based hand rub before handling your catheter.
- Watch for the signs and symptoms of catheter-associated bloodstream infection, such as soreness or redness at the catheter site or fever, and call your healthcare provider immediately if any occur.

If you have additional questions, please ask your doctor or nurse. Information from the CDC website: www.cdc.gov/hai/bsi/catheter_faqs.html



Palliative Care What is Palliative Care?



The goal of palliative care is to help you and your loved ones to have a better quality of life as you live with cancer. Palliative care gives you access to an interdisciplinary team that helps you manage pain and other symptoms.

Who Benefits From Palliative Care?

Research shows that patients who receive palliative care from the onset of diagnosis and treatment have improved quality and may extend length of life. This includes patients who are receiving curative treatment as well as those who are not. This is the difference between palliative care and hospice. Loved ones are also supported by palliative care.

How Can Palliative Care Help Me?

- Care includes help with managing pain, nausea, loss of appetite, constipation, insomnia, depression, anxiety, difficulty breathing, and other symptoms or side effects you may be experiencing.
- Access to professionals who can help you understand and discuss your treatment plan and goals of care. This includes advance directives which document your personal choices about your future care.
- Providing information about resources that may be needed for increased care needs.

How Does Palliative Care Work at Providence Regional Cancer Partnership?

Our Palliative Care service starts with a Registered Nurse and Nurse Practitioner who work closely with our support services. Support services include a Social Worker, Dietitian, Behavioral Health Counselors, Financial Counselors, Integrative Medicine Services, and referrals to community services and spiritual resources. Your team collaborates with your physician to ensure your unique needs are considered.

Getting Started

Call the Palliative Care Office directly at 452.297.5655 or speak with your doctor or nurse.

Radiation Oncology



Please do not hesitate to contact the **Radiation Oncology Office** with any questions or concerns. We are here to help, our goal is to make this process as easy as possible for you and your family.

Radiation Oncology Office 425.297.5590

Monday-Friday 8 a.m. to 5 p.m.

Radiation Oncology Fax 425.297.5595

Weekly Doctor Appointments

Each week of radiation treatment, you will have an appointment with your radiation oncologist to evaluate how you are tolerating your treatments and review side effects. At this brief appointment, your doctor will be available to you and your family to answer any questions or address concerns that you may have. Please leave your gown on after treatment so that your skin may be examined.

Typically, these appointments will be every THURSDAY following your scheduled radiation treatment. Occasionally, we may need to reschedule to a different day to accommodate the physician's schedule but this is an uncommon occurrence.

If you are waiting to be seen after your treatment for more than 20 minutes, please notify our front desk.

Important message: If you have symptoms that concern you prior to your **THURSDAY** check-up, please do not wait, ask your therapist to contact the nurse right away.

Radiation Therapy Skin Care During Treatment

Monitoring your skin closely and frequently during radiation treatment is important.

You are a part of the team so speak up at any time if you have questions, concerns, or notice skin changes. A nurse is always on-site and can evaluate the area and give you tips.

Most radiation skin reactions are mild and heal rapidly. Severe reactions require longer healing, but usually heal completely and present no further problems. Below are some tips and general guidelines for care during treatment.

General: Skin Care Tips for Intact Skin

Do not apply anything topical to the skin within the treatment area three hours prior to radiation treatments. Use after treatment and at bedtime. Use in the treatment field prior to treatment has been shown to increase skin dose in small studies.

Keep skin clean and dry.
Gently wash the skin with warm water using a soft washcloth (no scrubbing) and non-deodorant soap. (Ivory, Neutrogena, or unscented Dove are examples.) Pat dry.
Use gentle detergents to wash clothes and avoid starching clothes that are worn over the treatment areas.
Do not shave under the arm if it is in the treatment area. Wear loose fitting clothing.
Protect skin from wind, sun, and extreme temperatures.

Sunblock:

- During radiation: Sunblock may irritate skin, do not use in the treatment area.
- Post-treatment: Skin that has received prior irradiation is more sensitive to the sun. Sun protection factor (SPF) 30 with UVA/UVB protection is recommended.

Avoid:

- Removing any temporary marks that may be placed at the time of simulation before tattooing occurs.
- Bras with underwire support.
- Skin products and powders.
- Applying makeup to skin where you are receiving radiation treatment.
- Scratching the skin.
- Putting anything hot or cold, such as heating pads, directly on the treated skin.
- Hot tubs, swimming pools, or lakes, as the water may cause a skin reaction. (Check with your physician.)
- Adhesive tape or bandages within the treatment fields; special dressings may be provided.

Many skin care products are available over the counter to assist with providing comfort during treatment. Evidence is limited as to which products work best. Below is a list based on the Oncology Nursing Societies putting evidence into practice guide to cancer symptom management.

Over-the-counter Skin Care Products: Apply after treatment and/or bedtime:

CalendulaAquaphor®Plant extract cream (Capilen®)Vitamin E oil or creamLipiderm™Urea-based topical cream/lotion

Allantoin emulsion

Practitioner may recommend:

Corticosteroids, topical Topical steroid for pruritus Antihistamines
Silver sulfadiazine Antibiotics Specialty dressings

Please do not use topical corticosteroids (hydrocortisone creams) prior to a discussion with your physician or nurse.

Not recommended:

- Aloe vera
- Trolamine (Biafine®)
- Oral curcumin

Care and Comfort for Tender and/or Peeling Skin

Epsom Salts

- Mix solution using: 2 Tablespoons Epsom salts and 1 pint of warm water
- Make a moist compress and apply to affected skin.
- Leave compress on for 10-15 minutes and then let the skin air dry. Do this skin care treatment times per day.

Domeboro or Bluboro (Pharmacy: No prescription necessary)

- Mix with water as directed on package.
- Use a soft cloth and gently soak (not scrub) affected area for 10-20 minutes —up to three times a day.
- Refrigerate unused mixture and use for next soak
- May be used at room temperature or from the refrigerator for a "cooling" soak
- Allow to dry thoroughly.
- Always apply a moisturizing cream to the intact skin after soaking.
- Neosporin or Vaseline may be used in areas of skin loss. Ask your doctor if you need to use it longer than one week.

If any product seems to be making the reaction worse, stop using it and consult your radiation nurse or physician at **425.297.5590**



Center for Clinical Research

Providence Regional Cancer Partnership

Doctors and scientists can learn about better ways to prevent, diagnose, and treat diseases, including cancer by conducting clinical research. Participation in clinical trials provides patients with the potential to contribute to medical science, to improve their own health and wellbeing, and to help future patients who may be diagnosed with the same disease or condition.

Patients at the Cancer Partnership have the opportunity to take part in some of the country's most current and ground-breaking clinical research with the support of their doctors and care team. The Center for Clinical Research is now actively recruiting patients for numerous cancer trials, including Phase III and IV national trials, and many of the physicians from medical, radiation, and surgical oncology serve as the research investigators on the Center's clinical trials.

Types of Clinical Trials

- Treatment trials: These trials investigate treatments. Examples include cancer medications, immunotherapies, new approaches to surgery or radiation therapy, new combinations of treatments, and new methods for patient care.
- Prevention trials: These look for the best way to prevent cancer in people who do not have a history of cancer. They also look for ways to prevent cancer from coming back and ways to prevent a brand new cancer from developing in patients who have had it in the past. These trials also test new approaches, such as medicines, vitamins, minerals, or other supplements, that doctors believe may lower the risk of developing certain types of cancer.
- Screening trials: Screening studies test the best way to detect cancer, especially in its early stages. Quality of Life trials: These studies explore ways to improve comfort and quality of life for cancer patients.
- Registry trials: These are observational studies that collect information in order to learn more about a patient's experience with standard-of-care cancer treatment.

Why Should I Volunteer for a Clinical Trial?

The purpose of a clinical trial is to test the safety and effectiveness of the investigational product (drug or medical device) for use in people with a specific diagnosis, as well as to test if it is safe and effective for use in people in general. Your participation in a clinical trial may help contribute to new prevention recommendations, new screening guidelines, treatments of new diseases, and improvements in treatments already available.

How Does a Clinical Trial Work?

Every study follows a specific written plan or "protocol." The protocol describes the goal of the study, the number of volunteers needed, the types of tests required, and the number of visits requested, and also explains what information is collected by the research team. The information collected is put into a report which is sent to a government agency like the Food and Drug Administration (FDA). These agencies review results and decide if the investigational products should be approved.

Phases

Most clinical research that involves testing of a new drug are conducted in a series of steps called phases. This allows researchers to ask questions and review results at each step, which leads to more accurate and reliable research data and helps better ensure patient safety.



Clinical trials are usually classified into one of four phases:

Phase I – What is the right drug dose?

This phase evaluates how a new drug should be given (by mouth, injected into the blood, or injected into the muscle), how often it should be given, and what dose is safe to use.

Phase II – Is the drug effective?

This phase continues to test the safety of the drug and starts to evaluate how well the drug works. These studies usually focus on a particular type of cancer.

Phase III – Does the drug save lives?

This phase tests the new drug, or a new combination of drugs, and compares it to the current standard treatment. A participant is usually assigned at random to either the standard treatment group or to the study group. Phase III trials often enroll large numbers of people and may be conducted at multiple sites around the country and worldwide, including doctors' offices, clinics, and cancer centers.

Phase IV – Are there additional side effects?

After a new drug, treatment, or device has been approved and is being marketed, it is studied in a Phase IV trial to evaluate side effects that were not apparent in the Phase III trial. Usually, thousands of people are involved in Phase IV trials.

Clinical Trials Oversight

An Institutional Review Board/Independent Ethics Committee (IRB/IEC), also known as ethical review board, is a group formally designated to review and monitor biomedical and behavioral research involving human subjects.

In accordance with Food and Drug Administration (FDA) and Health and Human Services (HHS) regulations, an IRB has the authority to approve, require modifications in (to secure approval), or disapprove research. An IRB performs critical oversight functions (scientific, ethical, and regulatory) for research conducted on human subjects.

Patients participating in clinical trials will be monitored closely by their doctor and the research team during all study follow-up visits. The doctor and the research team will assess how the research patient is doing clinically and will be available to answer questions and address any concerns that may arise during participation in the trial. All study participants are provided with the names and contact information of research staff and are encouraged to contact the Research Coordinators or Research Assistants between follow-up visits if needed.

Contact the Center for Clinical Research at the Cancer Partnership by calling 425.297.5531 or by email at clinicalresearch@providence.org.

For more information on other clinical trials, please visit clinicaltrials.gov.

Patient Support Services

We understand that cancer affects patients and families in many ways. It is not unusual to experience distress related to the diagnosis, symptoms, and treatment of cancer. We want to make you and your family more comfortable as we work together to treat your condition. We want to help the whole you – body, mind, and spirit.

When you meet with your physician you will be asked to regularly fill out a form inquiring about your concerns and level of distress. We can help you access resources and learn to cope effectively with concerns you may have during cancer treatment. If needed, we can arrange for future meetings with a counselor, chaplain, social worker, dietitian, or support group to assist you throughout your treatment. These services are free of charge to you and your family, except for services offered by the clinical psychologist.

Behavioral Health 425.297.6851 Social Work 425.297.6851

Coordinated by a clinical psychologist, the staff also includes clinical social workers. The team provides brief, supportive counseling, and access to resources for patients and families, both during and after treatment. Assistance in areas of ethics, completion of Advanced Directives, Living Wills, and Durable Power of Attorneys for Health Care are available, including notary services.

Chaplain 425.261.4086

Spiritual care for many faiths and traditions is provided to patients and their families. Chaplains help people find strength whether a traditional "religious" connection or a place of peace and hope.

Dietitian 425.297.6851

Nutrition counseling both individually and for groups is available. Any patient, friend, or family member interested in the nutrition of the patient is welcome.

Clinical Nurse Specialist 425.297.5524

The oncology clinical nurse specialist assists patients in reviewing medical records, understanding medical treatment options, treatment planning, and exploring individualized wishes and/or concerns.

Financial Counselors

Medical Oncology 425.257.1469

Radiation Oncology Please refer to Social Work

Assistance can be researched for uninsured and under-insured patients to help offset the treatment expenses.

Integrative Medicine

Integrative Medicine offers a unique approach to healing. Services include a variety of complementary treatment options so patients can achieve maximum benefit and symptom relief. Your care is coordinated with your chemotherapy and radiation treatment. There are fees for these services that may or may not be covered by some insurance policies.

Integrative Medicine Services Offered

Acupuncture

Acupuncture is a form of treatment used in both traditional and classical Chinese Medicine. Acupuncture is based on the principle that there are energetic pathways, or channels, throughout the body that influence associated organs and structures. Energy from these pathways is stimulated with touch or needles to allow healing.

Naturopathic Medicine

Naturopathic Medicine is based on the belief that the human body has a natural healing ability. Naturopathic doctors teach their patients to use diet, exercise, lifestyle changes, and cutting-edge natural therapies to improve their bodies' ability to combat disease and decrease the side effects of treatment. Vitamins and supplements will also be addressed.

Nutrition Counseling

Nutrition counseling for specific diseases and symptoms to decrease the side effects of treatment and optimize nutrition.

To make an appointment with Integrative Medicine call 425.297.6851.



Cancer Genetics Clinic

Cancer Genetics Clinic Appointments offered:



Drop-In clinic:

No appointment necessary.

Tuesday-Thursday, 9 a.m.-3 p.m.

Cancer types seen at the drop-in clinic: Colorectal, ovarian, pancreatic, and prostate

Scheduled appointments:

Monday-Friday, 7:30 a.m.to 3:30 p.m.

Call **425-297-6850** to schedule an appointment.

Cancer is a Genetic Disease

Changes to genes that control the way our cells function.

Acquired/Sporadic

- · Chemicals, radiation, viruses, age
- Damage genes during a person's life
- Cannot be passed to the next generation

Inherited/Germline (Cancer Genetic Testing)

- · Passed directly from parent to child
- The mutation is found in every cell of a person's body

Difference between Genomic and Cancer Genetic Testing

Genomics

Whole-genome sequencing of tumors to find somatic variants (changes that occurred after you were born) to help explain the cancer biology. The goal is to find targeted cancer treatments or clinic trials specific to these DNA changes. Examples of this test are FoundationOne or Oncotype DX testing. Not all cancers need to have genomic testing completed so please discuss with your oncology provider to see if this is an appropriate test for your cancer treatment.

Cancer Genetic Testing

To see you have a cancer gene that you inherited from one of your parents. You receive half the genes from both your mother and father. If you are found to carry a cancer gene this may increase your risk for a future cancer. Steps can be taken to increase screening exams or sometimes surgery is indicated to help decrease the risk of future cancers. This is very important information for family members to help clarify their cancer risk. The results

of cancer genetic testing are now being used in the treatment of certain types of cancers. For example, in patients who are found to carry a BRCA mutation with metastatic pancreatic, breast, and prostate cancer a certain type of drug (PARP inhibitor) can be used in their treatment. This drug is now being used in advanced ovarian cancer patients. Some patients may even qualify for clinical trials.

How does it influence treatment?

Both genomic and germline (Cancer Genetic Testing) can influence your treatment for your cancer. Please discuss genomic testing with your oncology provider to see if testing is indicated.

Which appointment type is best for me?

The drop-in clinic provides easy access to testing that can be completed at any time during the patient's cancer treatment and can be coordinated with other treatments or appointments. Alternatively, if you have questions or prefer more time with the genetic specialist, call 425-297-6850 to schedule an appointment.

How will I get my results?

For the drop-in clinic, there are two options:

- 1. You can schedule a return visit to review the results with our genetic providers, this option provides the opportunity to ask questions and receive personalized recommendations.
- 2. If your results are negative, you may request your results to be released via MyChart and mailed to you. Please note, if your genetic results are positive for a mutation, we will request you to come for an in-person visit to review recommendations for you and your family.

To make an appointment with our Cancer Genetics Clinic call 425.297.6850.

