

REPORT OF SENIOR TRAINING FELLOWSHIP

1. **Name:** Nirmala Margaret P

2. **Department:** Continuing Nursing Education and Surgical Nursing

3. **Year of STF:** 2017

4. **Objectives stated in the application for STF**

- Update knowledge regarding medical and nursing management of patients with head and neck disorders
- Observe and learn the trends in the management of head and neck disorders
- Observe the practices of multidisciplinary team approach in managing patients with head and neck disorders
- Gain hands on experience in special nursing procedures such as flap assessment and care, swallow therapy, and complication prevention and management
- Explore the possibilities of research in the field of head and neck nursing

5. **Center visited for STF & Mentor**

- Center: University of Kansas Hospital, Kansas City, Kansas, United States of America
- Mentor: Dr. Thu Janes, Clinical Nurse Coordinator, Head and Neck Oncology, University of Kansas Hospital

6. **Short description of training:**

The senior training fellowship at the University of Kansas Hospital enabled me to enrich my experience in the care of patients with head and neck oncology. My observation included shadowing health care professionals in the following departments.

- ENT
- Medical Oncology
- Palliative Care
- Cancer Care

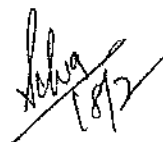
A. **ENT Department**

Patients with ENT disorders including oral cavity disorders are treated by the Otolaryngologists.

Nurse Navigators, registered B.Sc Nurses help in arranging appointments for patients for investigations and Surgeon visit. They are in constant contact with the patients and keep them abreast with the therapy plan and also involve in educating and providing guidance to patients through phone and email.

Registered Nurse assists the Surgeon in assessing the patients, providing prescription, scheduling appointments, and providing health education.

Nurse Practitioner (NP) provide consultation to the patients under the guidance of the Surgeons. A thorough general and system specific physical assessment is carried out by the NP. Treatment is provided under the supervision of the Surgeons. In the inpatient area NP assesses the patient and provides oral care, flap care, wound care, nutritional guidance, and health education. The NP also attends the rounds with the surgeons and contributes to the decisions regarding the management.



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Medical Assistant helps in scheduling appointments, ensuring prescription is sent to the appropriate pharmacy, guiding the patient and the health team members regarding the health insurance and obtaining reports from various health care agencies.

Surgeons assess the patient and decide on the management with the approval of the patient. Patient's with advance cancer or with any dilemma in providing care is presented in the *Tumour Board* and decision is taken in consensus with the team members who include Otolaryngologist, Medical Oncologist, Palliative Care Physician, Pathologist, Social Worker, Nurse Navigator, Nurse Practitioner, and the Radiologist.

Social Worker involves in assessing the occupational and economic status of the patient and provides counseling. She also organizes a *Head and Neck Support Group* every week on Tuesdays between 4.00 and 5.00 pm. Patients with head and neck disorders undergoing treatment and the survivors of head and neck cancer participate in this meeting. Patients share their experience of going through cancer management and ways to cope with it. Every patient who is newly diagnosed with head and neck cancer is encouraged to attend this meeting.

Dietitian visits the patients in the outpatient unit to provide consultation to the patient on their nutrition.

Swallow and Speech Therapist assesses the patient following surgery and radiation to initiate oral feeds. *Videofluoroscopy* is done by the Radiologist along with the Swallow therapist to assess the effectiveness of swallowing to decide on the type of feeding.

Exercise Therapist teaches exercises to the patient to prevent contracture.

Written information is provided as a booklet to patients about the disease condition, treatment options, outcome of each therapy and its side effects / complications, and the team involved in treating him/her.

B. Medical Oncology

The department of Medical Oncology deals with treating the cancer with radiation. Most of the patients undergo radiation prior to the surgical management. A few of them undergo after the surgery. A team of Physician, Nurse Practitioner, Registered Nurse, Nurse Navigator, and Medical Assistant along with the dietitian are involved in the care of the patient. Patient communication is done by phone or email. They are reminded of their appointment. Consultation is also done through phone or email during emergency situation. Patients visit the health team members during their every visit for radiation therapy and are assessed for complications related to radiation and appropriate treatment and advice is provided to control or prevent the side effects.

C. Palliative Care Unit

The palliative care unit deals with the symptom management of patients undergoing surgery, chemotherapy, and radiation for cancer.

- *Chronic pain management* is the primary care focus. Pain management is provided by Nurse Practitioners with the standing order under the guidance of the Oncologist.
- *Nutritional care* is another area of importance. Patients are assessed for the nutritional status and provided commercially prepared food as per the requirement of the patients. Dieticians meet with the patient during the visit by the Oncologist and the Nurse Practitioner and appropriate advice is provided. Percutaneous gastrostomy tubes are commonly used for patients undergoing treatment for oral cancer.
- *Oral care* is another essential treatment for patients with oral cancer. Nurse practitioner assesses the oral cavity for new lesions or thrush and prescribes medicines as per need.
- *Psychological support* is provided by a Psychologist who is part of the palliative care unit. Patients are routinely assessed for stress, anxiety, and depression and treated promptly.
- *Contracture and lymphedema prevention and management* is addressed by the Exercise Therapist. Regular assessment and appropriate exercises are taught to patients.

D. Cancer Care Unit

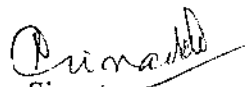
The cancer care unit treats patients with chemotherapy. First visit by the patient is dealt by the Oncologist. The subsequent visits are managed by the Nurse Practitioners. Dietician, Psychologist, Exercise Therapist, Chaplain, and Social Worker are involved in the care of patients undergoing chemotherapy.

7. Plans to implement objectives on return to CMC:

I will utilize the knowledge and experience gained to

- Organize the nursing care in the outpatient department and the inpatient services of the Head and Neck unit.
- Improve the patient assessment and communication
 - Revise the nursing assessment form
 - Update the patient information register
 - Create an email id for patient contact
 - Create a web page for patient information
- Prepare protocols for patient care
 - Flap assessment
 - Wound care
 - Oral hygiene
 - Nutrition after surgery
- Revise the existing handouts for patients
 - Information on oral cancer
 - Postoperative care following head and neck surgery
 - Oral self examination
 - Facial and eye exercise for patients undergoing parotidectomy
- Prepare new educational handouts for patients undergoing head and neck surgery
 - Swallow exercises
 - Nutritional management
 - Head and neck exercises
- Extend the services to private block
- Guide staff and students in the care of patients undergoing head and neck surgery
- Plan small projects or research in the field of head and neck nursing

Date: 18.2.17


Signature

