

JUST DIAGNOSED



In this section, you will learn about:

- Understanding your diagnosis
- Your health care team and the role of your family doctor
- Preparing for your first visit
- Return visits
- Advance care planning

Just Diagnosed

In this section you will learn how to prepare for the next steps in your cancer care. Everyone will have a different experience with their diagnosis.

Understanding your diagnosis

Get all the details that you need. Some people like to know all the details about their diagnosis, while others want to know less. Be sure to ask for all the details you want to know. You will have many chances to get more information – you do not have to get all the details at once.

To help you understand your diagnosis, some important details to know include:

- The type of cancer
- The grade of the cancer (e.g. what does it look like under a microscope? How aggressive is it?)
- The stage of the cancer
- If it has spread to other parts of your body
- What treatment is suggested for you

Ask questions. If there is something you do not understand or want to know more about, do not be afraid to ask. Sometimes it can be confusing to understand the details about your diagnosis or treatment. Cancer can bring a new language into your life so let your team know if there is something that is not clear.

Information about my diagnosis

Your doctor will explain your diagnosis. You can write this information here for quick reference.

Date of diagnosis:

Type of cancer:

Grade:

Stage:

Has it spread?



Notes

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My treatment plan



This section is a place where you can work with your health care team to map out how your cancer will be treated. You will be able to see what the next steps in your treatment will be.

Surgery		
Type of surgery	When	Notes

Radiation Therapy			
Start date	Stop date	Number of treatments	Area to be treated

Chemotherapy				
Start date	Stop date	How many	Type	Drugs
		<input type="checkbox"/> IV Treatment <input type="checkbox"/> Pill Treatment <input type="checkbox"/> Both IV & Pills		
		<input type="checkbox"/> IV Treatment <input type="checkbox"/> Pill Treatment <input type="checkbox"/> Both IV & Pills		
		<input type="checkbox"/> IV Treatment <input type="checkbox"/> Pill Treatment <input type="checkbox"/> Both IV & Pills		

Other Treatment (e.g., Hormonal Drug Therapy)			
Start date	Stop date	Drug	Notes



Meet your health care team

Your health care team at LRCP may include any of the following people:

Doctors

Oncologist

An oncologist is a doctor who specializes in caring for people with cancer. You may have more than one type of oncologist on your health care team, depending on your treatment plan.

Medical oncologist

Medical oncologists are doctors who specialize in using chemotherapy (drugs) to treat cancer.

Radiation oncologist

Radiation oncologists are doctors who specialize in treating cancer with radiation.

Surgical oncologist

Surgical oncologists are doctors who specialize in using surgery to treat cancer.



Nurses

Oncology nurses specialize in caring for people with cancer. Nurses work closely with your health care team and help coordinate your care.

Your **Registered Nurse** will:

- Teach you about your treatment
- Teach you how to manage side effects
- Give you information about services that are available in your community

Chemotherapy nurse



Chemotherapy nurses have specialized training to give chemotherapy. Your nurse will teach you how to care for yourself during treatment and manage any side effects related to your chemotherapy.

Nurse Practitioners (NP)

Nurse practitioners (NP) can assess your health, order and interpret test results, perform procedures such as biopsies, prescribe medications, order chemotherapy, and screen to prevent other illnesses.

Radiation nurses

Radiation nurses work closely with your radiation oncologist and radiation therapists to care for you during your radiation treatments. They assess how you are doing throughout treatment and will help you cope with any changes you may experience.

Telephone triage nursing

If you have a change in your condition, call telephone triage nursing at LRCP for assistance. The nurses can assess your situation and assist you in getting the help that you need.

Supportive Care staff

Registered dietitians

Registered dietitians can check your nutritional health and identify and treat nutritional problems. They can help you manage side effects through nutrition. See the 'Nutrition' tab to learn more about how registered dietitians can help you.

Social workers

Social workers can help you and your family cope with the emotional and practical concerns you may experience with cancer. See the 'Counselling' tab to learn more about how a social worker can support you.

Radiation Therapists

Radiation therapist

Radiation therapists deliver your daily radiation treatments. They help plan your treatment and operate the machines that use carefully targeted doses of radiation to kill cancer cells. Radiation therapists will also teach you about side effects related to radiation therapy and how to manage them.

Clinical specialist radiation therapist

Clinical specialist radiation therapists work closely with the radiation oncologists to ensure you receive safe and accurate treatment. They can answer questions about your disease and treatment and can support and guide you from consultation to after treatment.

Other LRCP Health Care Staff

Clinical research associate

You may be approached by a researcher to talk about joining a clinical trial. A clinical trial is a research study that is looking at new ways of treating cancer. You will have the final decision about whether you want to take part in a clinical trial.

Drug access facilitator

The drug access facilitator can help you understand your drug coverage and the types of help available to you. See the 'Finances' tab to learn more about how a drug access facilitator can support you.

Palliative care

The palliative care team is a group of professionals who support people with advanced cancer. The team consists of doctors, nurses, social workers, a spiritual care specialist, and others. Their focus is on pain and symptom control and meeting the physical, emotional, psychological and spiritual needs of the patient and family.

Pharmacists



Pharmacists provide patients with drugs prescribed by the doctor. They can also answer any questions or concerns you have about your medicines.

Cancer Genetics Program



The Cancer Genetics Program provides services to patients who are concerned about their personal and/or family history of cancer. A doctor can refer people who are considered to be at risk for an inherited cancer to the Cancer Genetics Program.

Students

London Health Sciences Centre is a teaching hospital. Students who are gaining experience in cancer care may be part of your team. Students may include medical students, residents, radiation therapy students, and more.

Volunteers

There are many LHSC volunteers who volunteer their time in the LRCP. They are available to help make your visit more comfortable. You will see them in their yellow vests all throughout the Centre. They are a great resource and are always happy to answer any questions you may have about the Centre.

Your First Visit

How long will my first visit take?



Your first visit may last several hours. It depends on many things, including the types of tests that need to be done and how many members of your health care team you will meet that day.

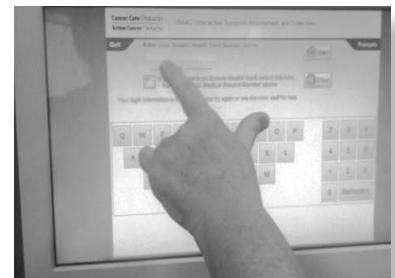
Help us understand your symptoms

You will experience a range of physical and emotional symptoms related to a cancer diagnosis and treatment. To better understand how you are feeling before you start treatment, you will be asked to rate your symptoms at a touch screen computer called a kiosk. A volunteer can assist you if you would like help.

You will also be asked to rate how the disease is impacting your daily life. Your answers will help you and your health care team identify changes in your symptoms and how they are impacting your daily life. A symptom screen report must be completed at every visit.

How was your visit today?

Your Voice Matters is a survey that gives you the chance to share your thoughts about each visit to your cancer centre or hospital. You can complete the Your Voice Matters survey at the same kiosk where you do your symptom screening questionnaire.



My appointment is delayed. Why is this happening?

Clinic appointments can be delayed if another patient is unwell or if there is an emergency. Your appointment may also start late if your doctor needs you to get blood work done. This will not affect the amount of time your oncologist or nurse spends with you.

Why am I being given a pager?

Pagers allow you the freedom to move about the centre while you wait for your clinic appointment. While you are waiting, you can carry your pager and visit the Patient & Family Resource Centre, go to the washroom, or have a coffee at Tim Hortons on Level 1. The pager will vibrate and flash when it is time for your appointment.



Return visits

Be prepared to stay between 1 - 6 hours for return visits. If you are coming in for chemotherapy or radiation therapy, the amount of time you spend at LRCP will depend on your treatment. Speak with a member of your health care team for more information.

Should I still see my family doctor?

Yes, your family doctor is still responsible for all non-cancer related health care (e.g., blood pressure, diabetes, and so on). Your health care team at LRCP looks after your cancer treatment and care. Your family doctor will receive notes from LRCP updating them on your cancer care.

If you do not have a family doctor, call the
Health Care Connect Patient Registry:
1-800-445-1822



When should I call my family doctor?

Contact your family doctor if:

- You have a concern **not** related to cancer, e.g. a heart condition, high blood pressure, diabetes
- You have any changes in your health between visits to LRCP such as a cold or the flu
- You need a refill on a prescription that is not related to your cancer care
- You need a regular check-up



Recommended resources

LRCP orientation

Visit the LRCP website at www.lhsc.on.ca/lrcp and click on 'LRCP Virtual Orientation' to view the tour. This video can give you a better understanding of what to expect at your appointment.

The **Patient & Family Resource Centre** offers computers with internet access, books, pamphlets and DVDs with information about cancer, cancer treatment, nutrition, coping with cancer, and much more.



The volunteers in the Resource Centre can help you find what you are looking for.

The Patient & Family Resource Centre can also be a quiet place to sit and relax. It is located on Level 1, underneath the main set of stairs.

Advance care planning

If you become unable to agree or refuse treatment or other care, it is helpful to let others know what your health and personal care choices are. Advance care planning is about reflection and communication. It is a time for you to reflect on your values and wishes.

Talking to your family, close friends and your health care team is an important part of advance care planning. Creating a plan of care will make sure your wishes are respected. It can also lower some of your caregivers' worry about making decisions for you.

Understanding advance care planning

Advance care planning - It is about speaking with family and friends, especially your "substitute decision-maker," and writing down your wishes. It may also include talking with health care providers, financial specialists, and legal professionals about your care choices.

Advance care plan - An advance care plan can be written down or simply told to someone who is authorized to speak for you, such as a substitute decision-maker. It can guide your substitute decision-maker to make medical decisions on your behalf if they are asked by a health care provider.

Substitute decision-maker - A person who makes medical decisions on your behalf when you are not able to express your wishes on your own. This person might also be known as a health representative or a Power of Attorney for Personal Care.

Power of Attorney / Power of Personal Care - A person who is legally chosen to speak on your behalf. To make it legal, you need to have a written document naming your Power of Attorney / Power of Personal Care and what their responsibilities are. If you do not select someone as your Power of Attorney, your health care team will ask the person closest to you based on a list of substitute decision-makers set by law.

Informed consent – This means that you are giving health care providers permission for medical inquiries and/or treatments. Health care providers give you detailed explanations of the inquiries/treatments and their risks before you verbally agree or sign the consent form.

Cardiopulmonary resuscitation (CPR) – This refers to medical procedures used to restart your heart and breathing when the heart and/or lungs stop working suddenly. CPR can be mouth-to-mouth breathing, pumping of the chest, electric shocks that restart the heart or machines that breathe for you.

Do-not-resuscitate (DNR) – A do-not-resuscitate (DNR) order tells medical professionals to not perform CPR. This means that doctors, nurses and emergency medical staff will not attempt emergency CPR if you stop breathing or your heartbeat stops.

Palliative care – This refers to care provided when you have a life-threatening illness. Palliative care is effective early in the development of illness and can be used with other therapies that may help lengthen life (e.g. chemotherapy and radiation therapy). It focuses on providing a good quality of life and keeping you as comfortable and free of pain as possible. Palliative care may involve medicines, treatments, physical care, psychological services, social services and spiritual support. This can be provided for both you and for those who are helping to care for you.

What you can do

- Talk with your family, friends and health care team about your wishes for treatment and medical care.
- Choose your substitute decision-maker.
- Document your wishes in a “Power of Attorney for Personal Care” form. The form can be found at: <http://www.attorneygeneral.jus.gov.on.ca/english/family/pgt/poa.pdf>.



Resources

Speak Up

More information about advance care planning can be found on the “Speak Up” website at: <http://www.advancecareplanning.ca>

Information and Support for Cancer Patients Who Smoke

Making the decision to quit or reduce the number of cigarettes that you smoke can be difficult during this time. It is important to know that becoming a non-smoker can help make your cancer treatment more safe and more effective.

Quitting smoking can help your radiation therapy treatment.



Radiation therapy works better if the level of oxygen in your body is normal. When you smoke, carbon monoxide in the blood makes it harder for radiation to do its job. If you do not quit smoking, you can improve your treatment by not smoking two hours before and two hours after radiation therapy treatment.

Quitting smoking can help your chemotherapy treatment.

When you smoke, the nicotine in tobacco decreases the level of effectiveness of some chemotherapy drugs.

Quitting smoking can improve the results of your cancer surgery.

Patients who quit before surgery

- use less sedation medication,
- have a lower risk of heart and lung complication,
- are at a lower risk of developing infections,
- heal more quickly, and
- have a safer surgery.

If you do not quit smoking, it is helpful to not smoke one week before your scheduled surgery date.

We can help.

- Ask a member of your health care team to refer you to a Smoking Cessation Champion at LRCP.
- Call 519-685-8600 ext. 50366 to speak to a Smoking Cessation Champion. If there is no answer, leave a message with your name and phone number and someone will get back to you.
- Email a Smoking Cessation Champion: quitsmoking@lhsc.on.ca