

ICE-T Class

Please sign in with your name and the patient's name in the chat room.

Please silence cell phones and turn off recording equipment.

Transition Nurses

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Immunotherapy

- Immunotherapy is a treatment that uses cells made in the body and modified in a lab to boost the body's natural defenses to fight cancer.

Immunotherapy is used to:

- Stop or slow the growth of cancer cells
- Stop the cancer from spreading
- Help the immune system work better to destroy cancer cells

Timeline

Admission

Immunotherapy
Administration

Recovery

What to Bring: Recommendations

- Several changes of clothing, extra undergarments
- Slippers with non-skid soles or sneakers
 - NO “flip-flops”, Crocs®, or open toed shoes
- Personal care items (toothpaste, deodorant, lotion, shampoo, electric razors only)
- Clean pillow or comforter
- Crafts, puzzles, cards, reading materials, laptop, gaming system with cables, etc.
- Personal medical equipment (sleep apnea machine, diabetic supplies, cane, walker, etc..)

Laundry

- There is a washer and dryer located on the fifth floor for patient and caregiver use
- ICE-T/TILs patients are not allowed to leave the floor; therefore, caregivers are responsible for doing patient laundry
- If there is no caregiver available, a family member or friend can drop clean clothes off at the front and staff will help exchange them for the patient's dirty ones.
- Patients are encouraged to bring many changes of clothes for their hospital stay or may wear hospital provided gowns

Admission Day

- Enter at Red Valet
- Proceed to Admissions Office
- Complete paperwork
- Receive room number and directions where to proceed

Cancer Center Inpatient Units:

PATIENTS

- You will be admitted to a room on 3 Central
- All rooms are private
- Patients are not allowed to leave the unit unless for a test or procedure (a mask must be worn when leaving the unit)
- Patients and visitors cannot enter other patient rooms

Cancer Center Inpatient Units:

VISITORS

- Visiting hours are open
- Visitors must be 12 years of age or older
- Visitors may not use patient's restroom, restrooms for visitors are located in the hallway

NO SICK VISITORS!!

Overnight Caregivers

- One adult caregiver may stay overnight if desired.
- A pull-out bed and linens are available. Consider bringing a twin-size bed pad for comfort.
- Caregivers should not use the patient's bathroom or shower
- A shower is available for caregivers in either the 3W or 4W BMT family lounge.

ICE-T Service/Team

- Physician
- Fellow
- Advanced Practice Provider
- Registered Nurse
- Social Worker
- Dietitian
- Case Manager
- Pharmacist
- Physical Therapy

Daily Routine

- Routine blood work
- Daily weights
- Weekly rectal swabs
- Nursing assessments & vital signs every 4 hours
- Orthostatic (postural) vital signs
- Hourly rounding & hourly measurement of intake and output
- EAT/DRINK/WALK
- Exercise (Physical therapy/walking on unit)
- Medications, IV fluids and transfusions as needed
- Personal hygiene (CHG)

CHG (Hibiclens)

- ❑ CHG (Hibiclens) is a medication for your skin that helps prevent infection. Either the soap or wipes must be used daily.
 - CHG soap is applied directly to skin and rinsed in the shower
 - CHG wipes can be used in place of showering and do not require rinsing
 - Do not use CHG wipes on face: use liquid soap/body wash instead

Orthostatic (Postural) Hypotension

- Occurs when there is a significant drop in blood pressure and increase in pulse with position changes
- Staff will assess by taking your blood pressure while you're lying and standing and compare the results
- When you have orthostatic hypotension you are great risk for passing out and falling
- Always report dizziness and light headedness to staff immediately

Treatment for Orthostatic Hypotension

- Fall precautions- Your SAFETY is our #1 priority
- Staff will encourage you to drink more fluids
- IV fluids
- Doctors will review your medications to see if they are increasing your risk for orthostatic hypotension

Falls

DON'T FALL - CALL!!

Falls can be caused by:

- Orthostatic hypotension
- Side effects of treatment/medication
- Weakness/Fatigue
- Dehydration
- Decreased blood counts

Preventing a Fall

DON'T FALL - CALL!!

- Please partner with us to keep you safe!
 - Call for assistance
 - Wear closed-toe shoes and avoid slippery foot coverings
 - Use recommended assistive devices
 - Store personal items within reach
 - Wear hearing aids & glasses if needed

FALLS

EVERYONE is at an increased risk for falling while in the hospital.

Here are some recent examples:

- 60 y.o. female, walking 30 or more laps per day, fell in the shower on day +8, fractured right lower leg requiring surgery
- 68 y.o. female, fell on the way out of the bathroom on Day -1, hit head on the bedside table requiring CT scans to rule out brain bleed
- 32 y.o. male, fell while getting off the toilet on Day +3, hit head on the grab bars, arms/shoulders scraped and bruised, CT scans and X-Rays required to rule out fractures and bleeding

Fall Precautions

DON'T FALL – CALL!!

Staff will assess you frequently to determine if you are at a high risk for falling.

- A bed or chair alarm WILL be turned on
- You will be asked to get out of your bed or chair only with staff present for assistance
- Staff will stay at your side while in the bathroom (this is where falls most commonly occur)
- A camera could be placed in your room for closer monitoring

Questions??



Infusion Day

- Therapy is infused at the bedside by the nurse
- Pre-medication may be given to prevent reactions
- IV fluids may be given before/after infusion
- Nurse monitors for possible reactions:
 - Itching, hives, changes in blood pressure/heart rate/breathing
 - Report any new symptoms to nurse right away
 - Additional medications are available if needed

Patient Wallet Card

- Depending on the therapy you receive a Patient Wallet Card will be given to you the day you receive your therapy.
- This card must be kept with you at all times.
- The card will contain a brief explanation of the treatment you received and the name and phone number of the doctor to contact for more information

Side Effects

- Fatigue
- Low red blood cells
- Low white blood cells
- High risk for infection
- Diarrhea
- Cytokine Release Syndrome
- Neurological Toxicities

Cytokine Release Syndrome (CRS)

Symptoms vary but may include one or more of the following:

- Fever, chills, fatigue, headache, skin rash, bleeding
- Irregular or fast heart rate, decreased heart function, low blood pressure (may require medication)
- Shortness of breath, low oxygen levels
- Low urine output or kidney failure
- Nausea, vomiting
- Headaches, dizziness, confusion, difficulty speaking

Neurological Toxicities

Symptoms may include one or more of the following and typically begin within the first week of treatment:

- Confusion
- Difficulty walking, speaking, reading or understanding speech
- Extreme sleepiness, dizziness, or tremors
- Facial droop
- Seizures
- Anxiety

ADVANCE DIRECTIVES

- Describes what type of treatment you would or would not want if you are unable to make those decisions on your own. Examples: CRS and/or Neurological toxicities.
- Who would you choose to speak for you if you are unable to speak for yourself?
- Please bring Advance Directives with you if they were not completed at Moffitt. Social Work can assist if not already completed.

CRS and Neurological Monitoring

- Checking your pupils
- Hand/foot and arm/leg strength
- Hand coordination
- Questions to look for confusion or difficulty speaking
- Perform simple body movements to look for tremors or difficulty walking
- Write a sentence to check for changes in handwriting
- Possible additional monitoring

CRS and Neurological Toxicities: Prevention & Treatment

Treatment depends on how serious your symptoms are:

- Seizure preventative medication (Keppra)
- Tocilizumab
- IV fluids
- Oxygen
- Possible dialysis
- Tests such as a CT, MRI, LP, or EEG may be ordered

-Severe symptoms may require transfer to the intensive care unit for additional monitoring and use of a ventilator or breathing machine.

Pain Management

It is **OK** to use pain medication to control your pain!

- You will not become addicted if using pain meds for pain management
- You are not bothering the nurse if you ask for pain meds
- Dose can be adjusted to reduce side effects while still controlling your pain
- These medications are prescribed by your doctor and monitored closely by the medical team

Our goal is to keep you pain at a comfortable level.

We will continuously ask about your make to make sure we are meeting this goal.

Transition to Outpatient Care

Stay locally with caregiver for approximately 30 days after date of cell infusion.

- Readmission to the hospital may be necessary during this time
- Central line will be removed before returning home
- Decision to return home is made by your ICE-T doctor

Questions??



Caregiver Roles & Responsibilities

BE AVAILABLE 24 HOURS A DAY, 7 DAYS A WEEK!

- Monitor for symptoms
- Monitor temperature
- Manage medications
- Help prevent infections
- Housekeeping
- Preparing Meals
- Drive and accompany patient to appointments
- Provide emotional support
- Take Care of yourself

Caregiver Illness

- ❑ Immediately report if you have a fever, productive cough, runny nose, sore throat, nausea, vomiting and/or diarrhea (BMT-CI Clinic #813-745-7208).
- ❑ If a caregiver is sick, he or she cannot continue to act as a caregiver. Caregiver must be symptom free and with doctor's note/clearance to care for the patient again.

Infection Prevention

HANDWASHING is the **# 1** way to prevent infection!

- Avoid crowds and handshaking
- All patients will need to wear a ‘duck bill’ mask until medical team says it is no longer necessary
- Do not allow sick visitors or those exposed to contagious disease
- Keep the home clean
- Follow food safety tips provide by the dietician

Handwashing

Soap and Water

- Wet** your hands with clean, running water (warm or cold), and apply soap.
- Lather** your hands by rubbing them together with the soap. Be sure to lather the backs of your hands, between your fingers, and under your nails.
- Scrub** your hands for at least 20 seconds. Need a timer? Hum the "Happy Birthday" song from beginning to end twice.
- Rinse** your hands well under clean, running water.
- Dry** your hands using a clean towel or air dry them.

• Content source: [Centers for Disease Control and Prevention](https://www.cdc.gov/hand/handwashing/when-how-handwashing.html)

Handwashing

Hand sanitizer

- Use an alcohol-based hand sanitizer that contains at least 60% alcohol.
- Apply the product to the palm of one hand.
- Rub your hands together.
- Rub the product over all surfaces of your hands and fingers until your hands are dry.
- Do **NOT** rinse.
- Do not use hand sanitizer if hands are visibly dirty, greasy, or if you're having diarrhea.

Content source: [Centers for Disease Control and Prevention](#)

Housekeeping/Laundry

- Patient should not be in the same room being cleaned
- Dust with a damp cloth as needed
- Vacuum and mop floors weekly
- Clean the eating area and bathroom daily
- Shower and change clothing daily
 - Change the towel and wash cloth daily
- Change sheets/pillow cases weekly

Medication Management After Discharge

- Use current medication list.
- Bring medication list and all medications to your appointments.
- If medications are changed, obtain a new medication list prior to leaving for the day.
- Get permission to take medications not on the list.

Preventing Infection

- Avoid contact with human or animal feces
 - Cleaning litter boxes, fish tanks, bird droppings, changing baby's diapers
- Avoid contact with animals like birds, reptiles, rodents
 - Avoid zoos, petting zoos, farms, and barns
- Most pets are OK
 - Patients cannot clean up after them
 - Avoid exposure to the face
- Practice good hand washing after any contact with animals

Preventing Infections

- Avoid contact with soil, lawn waste, grass, compost and gardening
- Avoid outdoor activities such as golfing, hunting, horseback riding
- No Swimming (public pools, hot tubs, lakes, ocean)
- No carpenter work or woodworking
- Avoid exposures to toxins
 - No construction sites
 - No second-hand smoke
 - No environmental chemicals
 - No illicit drugs and herbals

Permission needed from Doctor to:

- Resume driving
- Do housekeeping
- Take medicines not on current medication sheet
 - Including over the counter medications and vitamins
- Drink alcohol
- Return to work or school
- Stop wearing the mask
- Travel

Symptom Management after Discharge

- Fever greater than or equal to **100.4**, severe chills
- Check temperature twice daily (AM & PM)
- Symptoms of a cold (sore throat, runny nose, cough, etc.)
- Fainting, lightheadedness, dizziness, fatigue
- Changes in mental status (disorientation, confusion, etc.)
- Bleeding (nosebleeds, blood in urine, stool, vomit, etc.)
- Shortness of breath
- Swelling, tenderness, or redness of an arm or leg
- New uncontrollable pain (including headaches)
- Return of previous disease symptoms
- May vary from patient to patient

Symptom Management after Discharge

- For questions or to report symptoms
 - Call BMT-CI Clinic at **(813)745-7208**
 - Ask for Triage**
 - Available 24 Hours a day/7 days a week
- If unable to reach your clinical team by calling the above number,
 - Call Moffitt operator at **(813)745-4673**
 - Identify yourself as a ICE-T patient
 - Ask to speak to the Clinical Leader on 3 Central
- Emergency call **911**

Summary

- Education is one part of your preparation as a caregiver and as a patient.
- Never hesitate to call
- The ICE-T team is available 24 hours a day for you

Questions??

