

SWAG Cancer Alliance GP Treatment Summary: Non-Small Cell Lung Cancer Immunotherapy Treatment

National Cancer Survivorship Initiative (NCSI) - Working in Partnership



Department of Health



| | | | | |
|------|------|--------|-------------|--------|
| Name | Born | Gender | Hospital No | NHS No |
|------|------|--------|-------------|--------|

| | | | |
|--|--|---|--|
| Diagnosis: | Information will already be in place | | |
| Date of Diagnosis: | | | |
| Organ/Staging: | | | |
| Treatment Aim: | Drop Down Options: Palliative | Indicate from drop down treatment plan | |
| Treatment Aim Comments: | | | |
| This treatment summary relates to patients with non-small cell lung cancer who are receiving immunotherapy treatment | | | |
| Local/Distant | Insert relevant sites | | |
| Summary of treatment and relevant dates | Need to state – Name and dosage of immunotherapy agents if not already in place | | |

Comments:

The following to be used for all patients UNLESS YOU STATE OTHERWISE:

Immunotherapy is a distinct type of cancer treatment. Diagnosis and management of treatment-related side effects is different from 'conventional' chemotherapy drugs. Patients are at high risk of developing immunosuppression resulting in an inflammatory response in any organ. The side effects can initially be subtle however they can rapidly escalate and become life threatening. Side effects can occur even up to a year after stopping treatment. Patients with warning symptoms should be discussed urgently with an oncologist.

REFER TO THE [ONCOLOGY/ HAEMATOLOGY PRIMARY CARE RISK ASSESSMENT TOOL](#) FOR GUIDANCE

If concerning features in the history or examination, do not delay discussion with an oncologist whilst waiting for test results. N.B. lack of fever or normal neutrophil counts does not exclude significant side effects.

The following symptoms must be considered inflammatory and immune-related:

- Diarrhoea
- Increased stool frequency
- Blood in stools
- A raised liver function test
- Endocrine dysfunction

Alert symptoms that require referral back to specialist team

The following will be automatically inserted UNLESS YOU STATE OTHERWISE:

If the patient experiences any of the following symptoms the specialist team/ acute oncology service should be informed at the earliest opportunity:

- Shortness of breath and cough
- Diarrhoea

- Mucus or blood in stool
- Skin rash
- Visual disturbances
- Headaches
- Behavioural changes
- Muscle weakness
- Tingling in hands and feet
- Joint swelling

Secondary Ongoing Management Plan (Tests Appointments etc.)

Please remove if not applicable to patient:

Patient will have once weekly blood tests at the cancer centre or GP Practice (if agreed with the practice) to monitor for treatment toxicities

| | | |
|---|---|-----------------|
| Advise entry onto primary care palliative or supportive care register | Drop Down Options: | No |
| DS1500 application completed | Drop Down Options: | No |
| Prescription Charge exemption arranged | Drop Down Options: | Indicate Yes/No |
| Contacts for re-referrals or queries: In Hours Out of Hours | In & Out of Hours: Acute Oncology service 24 hour hotline (provide number) Lung Cancer Clinical Nurse Specialists (provide number) | |

| Referrals made to other services: | | | Tick relevant boxes or advise secretary which boxes to tick |
|---------------------------------------|-----------------------------|----------------------------------|---|
| AHP | Menopause/Endocrine support | Sexual dysfunction therapist | |
| Benefits/Advice Service | Occupational Therapist | Social Worker | |
| Bowel or bladder Incontinence service | Other | Speech and language therapist | |
| Clinical Nurse Specialist | Physical activity | Stoma service | |
| Complementary Therapist | Physiotherapy | Support Group | |
| Dietitian | Prosthetics service | Vocational Rehabilitation (work) | |
| District Nurse | Psychologist | Wig service | |

Required GP actions in addition to GP Cancer Care Review (e.g. ongoing medication, osteoporosis and cardiac screening):

CONSIDER ADDING A MAJOR ALERT TO THE PATIENT NOTES TO LAST FOR 12 MONTHS AFTER STOPPING THERAPY

Following confirmation from the oncology team the patient may require the following blood tests to monitor for treatment toxicities:

- Full Blood Count
- Liver Function Test
- U + E's
- Random glucose
- CRP
- LDH
- Thyroid function

Summary of information given to the patient about their cancer and future progress:

The following will be inserted UNLESS YOU STATE OTHERWISE:

..... is aware of all the details regarding his/ her lung cancer as documented in the information above and has been provided with an 'immunotherapy alert card'.

He/ she understands that the cancer is **incurable (amend if on adjuvant durvalumab)** and that they are receiving treatment with the aim of prolonging survival and controlling symptoms. He/ she is aware that if they have any symptoms of concern they should contact the lung cancer clinical nurse specialists who will advise on an appropriate course of action.

Additional information relating to lifestyle and support needs:

We have explained the importance of trying to maintain a healthy lifestyle during cancer treatment encouraging a healthy weight, well balanced diet, minimal alcohol, regular exercise and smoking cessation. There are many services available to support patients and the lung cancer clinical nurse specialists and our Macmillan Support Worker(s) are very happy to discuss any concerns or help with referrals