

SWAG Cancer Alliance GP Treatment

Summary: Lung Palliative

Chemotherapy

National Cancer Survivorship Initiative (NCSI) -
Working in Partnership



Department
of Health



Name	Born	Gender	Hospital No	NHS No
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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 the end of palliative chemotherapy only and may change with subsequent consultation and if so you will be advised by the consultant or lung clinical nurse specialist			
Local/Distant	Insert relevant sites		
Summary of treatment and relevant dates	State what chemotherapy has been given including dates and for how long if information not already in place		

Comments:

- **Add in patient specific information around side-effects experienced from chemotherapy**
- **Was a dose reduction was required?**
- **Include treatment response for non-adjuvant treatment**

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

Possible treatment consequences and/or late effects:

Short term

- Risk of infection for up to six weeks post chemotherapy
- Hair loss is temporary and will start growing back a few weeks after chemotherapy ends
- Skin and nail changes will improve post chemotherapy
- Lethargy, poor concentration and low stamina – these should all improve after treatment ends. Regular exercise can help speed up recovery
- It is important to use effective contraception for a few months post chemotherapy

Long term

- Blood clots
- Neuropathy - some chemotherapy such as cisplatin and taxanes can lead to neuropathy which may improve over time but persist long-term
- Deteriorating renal function - chemotherapy agents may be nephrotoxic and renal function may deteriorate late

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

Alert symptoms that require referral back to specialist team

The following will be automatically inserted UNLESS YOU STATE OTHERWISE:

- Any symptoms of local recurrence including a lump or discomfort
- Any symptoms of relapsed systemic disease including persistent anorexia and nausea, persistent bone pain, jaundice, persistent cough or shortness of breath, persistent headaches or neurological symptoms
- Hypercalcaemia or abnormal liver function tests on biochemical profiles, or radiologically proven metastatic disease should prompt urgent referral. Note sarcoma most commonly metastasises to the lungs

Secondary Ongoing Management Plan (Tests Appointments etc.)

Most patients treated for lung cancer are followed up by the specialist team for up to 5 years. Chest X-rays are performed routinely and scans will be arranged depending if symptoms or CXR are suspicious of relapse, or routinely in some cases to watch for early disease progression.

Patients can be referred back at any time to **insert relevant centre details** if there are any new concerns/ symptoms.

Indicate if referral to palliative care has been made in this space

Advise entry onto primary care palliative or supportive care register	Drop Down Options:	Indicate Yes/No
DS1500 application completed	Drop Down Options:	Indicate Yes/No
Prescription Charge exemption arranged	Drop Down Options:	Indicate Yes/No
Contacts for re-referrals or queries: In Hours/Out of hours	Contacts for re-referrals or queries: For complications of oncology treatment within 6 weeks: In Hours: Oncology Acute Care (provide number) Out of hours: Oncology Registrar on Call - (provide number) Lung Cancer 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

State the following AS APPROPRIATE:

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. He/ she understands that the cancer is incurable and that they have received treatment with the aim of prolonging survival and controlling symptoms. He/ She understands that if they have any symptoms of concern they should contact the lung 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 a healthy lifestyle after cancer treatment encouraging a healthy weight, well balanced diet, minimal alcohol, regular exercise and smoking cessation.

There are many services available to support patients in their recovery and the lung clinical nurse specialists and our Macmillan Support Worker(s) are very happy to discuss any concerns or help with referrals:

Insert relevant local information about Cancer Information & Support centres, hospice support, exercise schemes, self-management programmes, fatigue management services, support groups etc.