Welcome to the Metro Health Cancer Center

Thank you for choosing Metro Health – University of Michigan Health to participate in your care. We look forward to welcoming you to our Cancer Center and getting to know you throughout your time here.

We recognize this might be a stressful time, and we are here to help you and your family every step of the way. In this binder, you will find information to help you prepare for your treatments and make your time here as efficient and organized as possible. We believe that you play a key role in your treatment and recovery. This is where your treatment journal comes into play. Our compassionate staff will create a personalized treatment plan that fits your needs. Keeping track of your symptoms and side effects better helps your caregivers to formulate a treatment plan special to you and your needs.

In the fight against cancer, you are never alone. From diagnosis to treatment to recovery, a team of highly-skilled physicians who consider listening among their most powerful tools surrounds you. Our dedicated team is committed to finding the answers to the hardest questions through state-of-the-art diagnostics, treatments, advanced academic research and clinical trials. Your healthcare team will partner with you to develop your individual treatment plan. Our doctors, nurses and staff are dedicated to helping you with the most effective treatment in a caring and compassionate manner.

Please feel free to ask any member of our staff for assistance. If you experience any difficulties or have questions, please let us know. We welcome any suggestions that you believe will improve our services.
PREPARING FOR YOUR VISIT

Confirm your Insurance Coverage

Medical insurance coverage varies greatly and can be confusing. You will need to confirm the details of your coverage before your appointment. Please follow these steps to verify your insurance benefits.

- Contact your Primary Care Physician’s office. (Note: the doctor that referred you to the Metro Health Cancer Center may not be your Primary Care Physician.)
- Your insurance provider may require your Primary Care Physician to complete a referral form prior to your visit.
- Sometimes a visit to a specialist is not a covered benefit. To help you through the paperwork, Metro Health has a dedicated financial coordinator to simplify the process. If you’d like to meet with our financial coordinator, just let any staff member know. Our financial coordinator is available on a daily basis, and no appointment is needed.

Sign up for MyChart

Your health is important to us around the clock – not just during business hours. With MyChart, you can connect to your doctor’s office online.

- Request appointments
- Request prescription renewals
- Review health history
- View immunization records
- Send a secure non-urgent message to your care team

Your login information for MyChart will be available on your After Visit Summary. Once you create your account, write your login information here to refer back to if needed.

Canceling or Rescheduling your Appointment

If you need to cancel or change your appointment, please notify us as soon as possible and at least 24 hours in advance by calling the number on your appointment card, 616.252.8100.

Things to Bring

- Insurance card
- Drivers license
- Pharmacy card

MyChart

You can log on to MyChart at metrohealth.net. Just click on the MyChart button on the home page.

MyChart ID: _______________________

Password: _______________________

continued on the next page
ON THE DAY OF YOUR VISIT

Arrive Here Safely and Well Rested
The Cancer Center is located within the Metro Heath Village. A map of the village is located on the next page and the back of the binder. Arriving well rested can help you stay agile and on top of your care.

Arrive on Time
Plan to arrive at least 15 minutes prior to your scheduled appointment. You will need time to park, check in and complete any final forms.

Parking
For your convenience, free parking is conveniently located directly in front of the Cancer Center.

What to Bring
This binder is a tool for you and your care team to use throughout your treatment. We encourage you to use this binder at home and bring it with you to every appointment. Please remember to bring a current copy of your insurance card and personal identification.
GETTING TO & AROUND METRO HEALTH VILLAGE

Directions to the Metro Health Cancer Center
From Byron Center Ave:
At the stoplight, turn onto Metro Way. The Metro Health Cancer Center will be on the right side of the road, just past Metro Court.

From Gezon Parkway:
At the stop light near the YMCA, turn onto Metro Way. The Metro Health Cancer Center will be on the left side of the road, past the Veteran’s Administration Outpatient Clinic.

Free parking is conveniently located directly in front of the center.
COLLECTION SPECIMEN SITES
Walk-in locations for blood draws, urine collections, etc.

LAB SERVICES ARE OFFERED ON A WALK-IN BASIS WITH A DOCTOR’S ORDER. PLEASE CALL THE LOCATION FOR LABORATORY HOURS.

1. Metro Health Hospital*
   Outpatient Lab
   5900 Byron Center Ave SW
   Wyoming, MI
   p 616.252.7237  f 616.252.7444

2. Metro Health Professional Building* Outpatient Lab
   2122 Health Dr SW
   Wyoming, MI
   p 616.252.7025  f 616.252.6980

3. Metro Health Allendale
   11160 W.J. Presley Pkwy
   Suite 100
   Allendale, MI
   p 616.252.3900  f 616.252.3920

4. Metro Health Caledonia
   8941 North Rodgers Ct SE
   Caledonia, MI
   p 616.252.5300
   p 877.244.2865
   f 616.252.5390

5. Metro Health Cascade
   4300 Cascade Rd SE
   Grand Rapids, MI
   p 616.252.1500  f 616.252.1599

6. Metro Health Cedar Springs
   41211 White Creek Rd NE
   Cedar Springs, MI
   p 616.252.6320
   p 616.696.6320
   f 616.252.6390

7. Metro Health Community Clinic
   781 36th Street SE
   Wyoming, MI
   p 616.252.4100  f 616.252.4782

8. Metro Health Comstock Park
   4200 North Division Ave
   Comstock Park, MI
   p 616.252.1600  f 616.252.1666

9. Metro Health Grandville
   4285 Parkway Place SW
   Grandville, MI
   p 616.252.4300  f 616.252.4396

10. Metro Health Hudsonville
    3912 32nd Ave
    Hudsonville, MI
    p 616.252.8700  f 616.252.8750

11. Metro Health Jenison
    7686 Georgetown Center Dr
    Jenison, MI
    p 616.252.8600  f 616.252.8660

12. Metro Health Lowell*
    2550 West Main Street
    Lowell, MI
    p 616.252.5640  f 616.252.5690

13. Metro Health Park East
    4055 Cascade Rd. SE
    Grand Rapids, MI 49546
    p 616.252.4043

14. Metro Health Rockford
    4685 Belding Rd NE
    Rockford, MI
    p 616.252.3100  f 616.252.3120

15. Metro Health Southwest*
    2215 44th St SW
    Wyoming, MI
    p 616.252.8325  f 616.252.8391

16. Metro Health Wayland
    893 East Superior St
    Wayland, MI
    p 616.252.3400  f 269.792.6268

* Pediatric phlebotomists available
IMAGING SITES

SCHEDULING

All services except screening mammography require a doctor’s order. X-rays are performed on a walk-in basis. Hours for imaging services vary by location. Call Central Scheduling for Bone Density, Mammography and Ultrasound appointments. Call the Metro Health neighborhood physician office to confirm hours for walk-in X-ray services.

1 Metro Health Hospital
5900 Byron Center Ave SW
Wyoming, MI
Imaging Questions:
616.252.7159 | 616.252.6990

2 Metro Health Allendale
11160 W. J. Presley Pkwy, Ste 100
Allendale, MI
Services: X-ray
X-ray: 616.252.3900

3 Metro Health Caledonia
8941 North Rodgers Ct SE
Caledonia, MI
Services: Mammography & X-ray
X-ray: 616.252.5300 or 877.244.2865

4 Metro Health Cascade
4300 Cascade Rd SE
Grand Rapids, MI
Services: X-ray
X-ray: 616.252.1500

5 Metro Health Cedar Springs
41211 White Creek Rd NE
Cedar Springs, MI
Services: Mammography, Ultrasound & X-ray
X-ray: 616.252.6300

6 Metro Health Community Clinic
781 36th St SE | Wyoming, MI
Services: Ultrasound & X-ray
X-ray: 616.252.4100

7 Metro Health Comstock Park
4200 North Division Ave
Comstock Park, MI
Services: Mammography, Ultrasound & X-ray
X-ray: 616.252.1600

8 Metro Health Hudsonville
3912 32nd Ave | Hudsonville, MI
Services: Mammography & X-ray
X-ray: 616.252.8700

9 Metro Health Jenison
7686 Georgetown Center Dr
Jenison, MI
Services: X-ray
X-ray: 616.252.8600

10 Metro Health Lowell
2550 West Main St | Lowell, MI
Services: Mammography, Ultrasound & X-ray
X-ray: 616.252.5600

11 Metro Health Park East
4055 Cascade Rd. SE
Grand Rapids, MI 49546
Services: Mammography, Bone Density & X-ray
X-ray: 616.252.4000

12 Metro Health Rockford
4685 Belding Rd NE
Rockford, MI
Services: X-ray
X-ray: 616.252.3100

13 Metro Health Southwest
2215 44th St SW | Wyoming, MI
Services: X-ray
X-ray: 616.252.8300

14 Metro Health Wayland
893 E Superior St | Wayland, MI
Services: X-ray
X-ray: 616.252.3400 or 269.792.3400

Imaging | 616.252.4461 | metrohealth.net
FREQUENTLY ASKED QUESTIONS

Will I be able to drive to and from my appointments?
You are encouraged to have a driver for your first treatment appointment. If you are not able to arrange a driver, you are encouraged to have someone you can contact at the completion of your appointment in the event you are not able to drive home.

After your first appointment, whether or not you can drive depends on the medications you receive, your response to them and your overall health. Please discuss any transportation concerns you may have with our Social Worker prior to your first treatment.

How long will I be there on each day of treatment?
It is best to plan on spending a good portion of your day at the Cancer Center. Your care team can provide you approximate lengths of treatment, but there are many unexpected things/events that may add time to your stay. It is important to remember any time frame you are provided is only an approximation.

The treatment you receive is designed specifically for you and the type of cancer for which you are being treated. Many times, there are additional medications (outside of chemotherapy) that are administered to prevent side effects. Your care team will ensure every effort is made to minimize your treatment time, while providing optimal and safe care.

You will be evaluated and cared for according to your appointment time and not time of arrival to the center. Though many patients prefer to arrive to appointments early, you will be called back for treatment based on your previously agreed upon appointment time.

It is also important to remember that you must have a previously scheduled appointment with a provider to be seen for evaluation that day. Due to the number of patients we treat on a daily basis, we are not able to accommodate walk-in appointments. If you believe you need to be seen for evaluation by a provider, please call to discuss scheduling an appointment.

Can I bring family members with me to my appointments?
We encourage you to bring a support person with you to some of your appointments. We do ask that you limit your guests to 1-2 people. Due to limited space and risk of infection, our infusion suite cannot accommodate greater than 2 guests per patient.

We also encourage you to not bring children to your appointments. For their safety, children under the age of 13 are not allowed in our Infusion Suite. If children are brought to the center, they must be in the company of a supervising adult at all times. If advance notice is provided, your care team can consult with the Child Life Specialist team who can assist in providing activities for the children while you receive treatment.

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Should I take my normal medications prior to arriving for my treatment?

You should take your medications as scheduled unless directed otherwise by your care team. Bring any medications that you would normally take during the day. Please let your care team know about all medications you are taking (or plan on taking). This includes prescription medications, over the counter medications, vitamins, minerals, herbs and supplementations. Please discuss with your nurse if you plan on taking any medications during your treatment appointment. **Bring a list of your current medications (including dose and instructions) with you to each appointment.**

Can I eat before and during my treatment?

Many patients worry about eating the morning of their treatment. We encourage you to eat according to your normal schedule and not to skip meals prior to treatment. Be sure to drink plenty of fluids (non-caffeinated and non-alcoholic) the day before and the day of treatment. Staying well hydrated helps veins be more accessible during IV placement.

You are welcome to bring snacks/meals and beverages (non-alcoholic) to your treatment appointment. A microwave is available for use. The lounge does offer complimentary coffee and tea and also has vending machines for snacks and drinks.

There are also numerous restaurants near our center, and some do offer the option of delivery. Please discuss with your nurse if you would like a list of available options.

Because people who are being treated with chemotherapy are often sensitive to odors, we ask that you do not bring in foods that have strong odors. We discourage foods that contain fish, garlic, onion or significant spices. If you have concerns regarding food during treatment, please discuss with your nurse.

What should I wear to treatment?

We encourage you to dress in layers to account for variations in temperature within the building. Wear loose and comfortable fitting clothing. If you have a port, wear shirts that allow easy access to your port, such as, button or V-neck shirts. If you will have an IV placed while present for treatment, wear shirts that allow easy access to your forearms. Because our infusion area is not carpeted, we ask that you wear shoes with rubber soles to avoid accidental slips and falls.

What must I do if I need any refills on my home medications?

If the medication was prescribed by one of our providers, we will be happy to refill the medication for you (once the provider deems the medication is still necessary). We ask that you provide 2-3 days advance notice for any refill request(s). Refills may be requested during your visit, through a telephone call placed to our center or via MyChart. It is important to keep your care team updated on any pharmacy changes so we can ensure your refill is sent to the appropriate pharmacy.
Precautions to take at home following chemotherapy

Following treatment with chemotherapy, you will need to take precautions in your home. These precautions will protect you and those around you from coming in contact with chemotherapy byproducts. Chemotherapy may be present in urine, vomit, blood and sexual fluids. Most chemotherapy medications will be out of your body in less than 48 hours. Therefore, it is recommended you follow the following precautions for two days (48 hours) after completion of your chemotherapy.

**Body Fluids/Waste:**

Small amounts of chemotherapy are present in your body fluids and body waste.

When using the toilet, flush twice with the lid down. Others in the home may use the same toilet as long as you flush all waste down immediately.

Do not have sexual activity for 48 hours after receiving chemotherapy because body fluids may contain byproducts of chemotherapy. It is very important that you or your partner do not get pregnant while receiving treatment with chemotherapy. Use a barrier method (condom) if you plan to have intercourse. Discuss with your care provider if a second form of birth control should be used to avoid pregnancy during treatment. Prior to engaging in sexual activity, it is important to ensure your blood counts are adequate (specifically platelets and white blood cell count). You are encouraged to discuss this with your care team if you have concerns and/or questions.

**Laundry:**

Should linens or clothing become soiled (during the 48 hours following chemotherapy) due to incontinence, blood, vomit, or sexual fluids, do not wash them with the other household items. Use soap and hot water and wash soiled linens immediately. Items should be run through the washer with soap and hot water twice.

If you cannot wash your linens/clothing right away, double-bag them in plastic garbage bags and keep them separate from other household laundry. After your items have been washed, throw away the plastic bags in your regular trash.

**Always wash your hands with soap and water after any contact with chemotherapy or body fluids/waste.**
OUR MEDICAL TEAM

Medical Oncology

Michael Zakem, DO
Medical Director of Oncology Program

A graduate of Michigan State University College of Osteopathic Medicine in East Lansing, Dr. Michael Zakem completed his internship and residency in internal medicine at Metro Health Hospital. He completed a fellowship in hematology/oncology at Michigan State University College of Human Medicine in East Lansing, followed by a hematology/oncology fellowship at Case Western Reserve University/Cleveland Metropolitan General Hospital. Dr. Zakem is board certified in internal medicine, medical oncology and hematology.

Stephanie Dublis, DO
Hematology/Oncology

Dr. Stephanie Dublis is a graduate of Midwestern University Medical School in Chicago, Illinois. She completed her residency in internal medicine at Loyola University Medical Center where she then worked for a year as a hospitalist. She went on to complete a fellowship in oncology and hematology at Loyola. Dr. Dublis is board certified in internal medicine, medical oncology and hematology.

Sulsal Haque, MD
Hematology/Oncology

Dr. Sulsal Haque earned his Medical Degree at Leicester Warwick Medical School. He completed his hematology/oncology fellowship and internal medicine residency at the University of Cincinnati Medical Center of Ohio. He is board certified in Internal Medicine.
Radiation Oncology

Julie Forstner, MD  
Medical Director of Radiation Oncology

Dr. Julie Forstner is a graduate of the University of Michigan Medical School. She completed her residency in radiation oncology at the University of California, San Francisco, where she served as the chief resident in the department of radiation oncology. Dr. Forstner is board certified in radiation oncology.

Terri Bott-Kothari, MD  
Radiation Oncology

Dr. Terri Bott-Kothari earned her medical degree from Wayne State University in Detroit. She completed both her internship and residency at the University Hospital of Cincinnati, where she also served as chief resident. Dr. Bott-Kothari is board certified in radiation oncology.

Ahmet Tunceroglu, MD, PHD  
Radiation Oncology

Dr. Ahmet Tunceroglu is a graduate of New Jersey Medical School of Newark. He completed his radiation oncology residency at Rutgers Robert Wood Johnson Medical School. Dr. Tunceroglu earned his PHD from UMDNJ Graduate School of Biomedical Sciences. Dr. Tunceroglu is board eligible in radiation oncology.
Aaron Zarnosky, PA-C  
**Hematology/Oncology**

Aaron graduated from Grand Valley State University with a bachelor’s degree in biomedical sciences. He went on to receive his master of physician assistant studies degree from GVSU. Having spent more than 14 years working with pediatric and adult patients in hematology/oncology and neurology, his background in cancer care is diverse. Aaron has experience caring for patients in both an inpatient/acute care setting and an office environment.

Cheryl Verstrate, DNP  
**Hematology/Oncology & Genetics**

Cheryl graduated from Grand Valley State University with a bachelor’s degree in nursing and went on to obtain her doctorate in nursing practice from GVSU. She has hematology/oncology nursing experience in both the inpatient and outpatient care settings. Cheryl is certified in oncology and has received her nurse practitioner certification from the American Nurses Credentialing Center. Cheryl also completed interdisciplinary training focused on cancer genetics through the City of Hope NCI designated comprehensive cancer center program.

Emily Mathew, NP  
**Survivorship Nurse Practitioner**

Emily graduated from Calvin College with a bachelor of science in nursing and went on to receive a master of science in nursing from the University of Texas Health Science Center at Houston. As the Survivorship Nurse Practitioner, Emily specializes in cancer prevention and improving health and wellness after cancer treatment is completed. Emily is skilled in managing both the symptoms of cancer and treatment side effects. She also has experience caring for patients with multiple cancer diagnoses.
Your Care Team
The Cancer Center’s care team works with your doctor to plan the best care for you in both the inpatient and outpatient settings. Your care team includes physicians, nurses, a social worker, dietitian, chaplain, nurse navigator, financial coordinator, palliative care provider and other professionals to support you through your treatment.

Nurse Navigator
The nurse navigator is an advocate to help you solve problems, conquer the medical maze and develop a personal roadmap to recovery. This healthcare professional acts as a liaison throughout the Metro Health system and the broader community.

Financial Coordinator
Our financial coordinator is here to help you alleviate the financial stress and strain that can occur during your care. Our coordinator will walk through the process with you and help identify assistance options. They can also provide co-pay, prescription, Medicare/Medicaid and FMLA assistance and help with financial assistance applications and appeals if services are denied. If you need the services of the financial coordinator, please call (616) 252-3266.

Registered Dietitian
A registered dietitian is available for individual counseling regarding nutritional issues. For more information or to schedule an appointment, please call (616) 252-8151.

Social Work
Oncology social workers help patients and their families deal with problems brought on by illness. These problems are usually social, emotional, financial or all three. If you need the services of a social worker, please call (616) 252-8152.

Survivorship Coordinator
Our survivorship coordinator is available to help patients move forward after cancer treatment is completed. Survivorship care can assist in dealing with post-treatment health issues, achieving a healthy lifestyle and having a coordinated plan for follow-up care.

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Palliative Care
Our palliative care is focused on pain and symptom management to help relieve suffering and improve the quality of life for those with a chronic or life-threatening illness. We also offer support services for the patient’s family.

Family Bonds Cancer Support Group
Our weekly support group provides a comfortable place to share, learn and heal with others on a similar journey. This group meets every Tuesday evening for dinner at 5:30 p.m. and group discussion from 6-7:30 p.m. Metro Health partners with Gilda’s Club Grand Rapids for this special program being offered not only for cancer patients, but also their family and friends. With support from Metro Health Hospital Foundation donors, this program is free and open to individuals with all types of cancer whether in treatment or not. Our child life specialists also provide a children’s group for ages 2-17 at the same time as Family Bonds. Call (616) 252-8152 to register or ask questions.

Child Life Services
The Child Life Program at Metro Health supports children and teens up to 18 years old during difficult or stressful healthcare experiences. This free service is offered to all children, including the young relatives of our adult patients. Our certified child life specialists use developmentally appropriate activities and therapeutic play to help children and their families understand and adjust to medical situations. We also offer a weekly support group for children ages 2-17, which meets from 5:30 – 7:30 p.m. every Tuesday night alongside our Family Bonds Cancer Support Group. For more information or to register, please call (616) 252-8152.

Clinical Trials
The Metro Health Cancer Center is committed to ongoing studies of new therapies and research for new cancer treatments. Physicians study and adopt the latest treatments that may offer more hope for the effective treatment of numerous cancers. Patients and their families can stay closer to home and enjoy the convenience of community-based care. Please talk to your doctor or nurse for more information.

Genetics
About 5% to 10% of cancers develop because a person has inherited a gene mutation. Knowing if you or your family members are at risk for hereditary cancers, like breast and ovarian cancer, can allow you to plan strategies to prevent cancer, catch it earlier or treat it more aggressively. Our genetics team will work with you to determine if your family has a higher risk of developing cancer, and if additional screening is necessary.

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**Warren Reynolds Cancer Library**

We offer an extension of the Warren Reynolds Cancer Library that has been funded by Michael Donovan, Jackie Scott and other community donors. Michael is a cancer survivor who after completing his treatment, wanted to give back to the community. His goal is to make sure that future patients and families have the appropriate resources to assist them during their own cancer journeys. The library also has two computers that patients and family members can use. Along with the internet, the physicians have requested a few specific research sites, so patients are able to obtain facts about their diagnosis. These specific websites have been approved as having the correct clinical information regarding cancer or a similar diagnosis.

**Metro Health Cancer Center Healing Garden**

Relax and renew your spirit in the lovely garden patio. It is the perfect place to rest between appointments, to sit outside while you receive treatments or to wait for a loved one.

**Metro Health Hospital Foundation**

The Metro Health Hospital Foundation has provided the Cancer Center with the funds to help our patients with financial, educational and emotional assistance. The Foundation is funded by grants and personal donations. To learn more or to inquire about how to give back to future patients, please contact the Metro Health Hospital Foundation at (616) 252-5000.

**The Metro Health Cancer Center Website**

Find more information about the Metro Health Cancer Center and online at metrohealth.net. Click on Medical Services and choose Cancer Center.
## MY APPOINTMENTS

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
DIAGNOSIS AND TREATMENT PLAN OVERVIEW

Diagnosis (name of my cancer):

_________________________________________________________

Stage of my cancer (if applicable):

_________________________________________________________

Oncologist: _____________________________________________

Primary Nurse: __________________________________________

SIDE EFFECT MANAGEMENT

Side effects are problems that may be caused by the chemotherapy medications you are receiving. Based on the specific chemotherapy you receive, you may have many side effects, only a few side effects or none at all. Your body’s reaction to chemotherapy and the development of side effects depends on a number of things, such as length of treatment, the dosage prescribed and your personal health history.

Chemotherapy is designed to target fast growing cells. But, because many medications are not cancer cell specific, it can also affect fast growing healthy cells. These cells are often found in the lining of your mouth and intestines in your bone marrow (where blood cells are made) and in the cells that affect hair growth. The side effects are a result of chemotherapy causing harm to these healthy cells.

It is important to remember that each person reacts differently to chemotherapy and its potential side effects. Because of this, the following pages provide only an overview of the most common chemotherapy associated side effects. In order to provide optimal care to you during treatment, it is crucial that you discuss all concerning symptoms with your care team and inform them of any side effects that you are experiencing.

When and How To Contact Your Care Team

For medical emergencies:  Call 911

For symptom management and non-emergencies:  Call (616) 252-8100

Your call will be answered at the Cancer Center Monday – Friday, 8:00 am to 5:00 pm. Outside of those days/hours, your call will be answered by an on-call service, and you will be connected to the provider on-call.

When Should I Call My Care Team?

- A fever of 100.5° Fahrenheit or greater
- Shaking and experiencing chills
- Bleeding or unusual bruising
- Burning and/or pain when urinating
- Constipation (no bowel movement for 2-3 days)
- Diarrhea (three or more loose/watery stools in 24 hours)
- Nausea/vomiting not controlled with anti-emetics
- Pain not controlled by your current medications
- Redness, sores, pain or a white coating (or white patches) inside your mouth
- Sore throat, lung congestion, unusual cough, shortness of breath
- Any symptom(s) that concern you
Nausea & Vomiting

Nausea is having a sick or queasy feeling in the stomach, and vomiting is the expulsion of food or liquids from the stomach. Nausea and vomiting are often the most feared side effects of cancer therapy. However, due to the improvement of anti-nausea medications, it is generally better tolerated than it was years ago.

Common causes of nausea & vomiting:
- Chemotherapy
- Radiation therapy
- Constipation
- Brain tumors
- Anxiety
- Medications (pain medications and antibiotics)
- Acid reflux
- Inner ear problems (vertigo)

Complications of nausea & vomiting:
- Dehydration
- Interference with quality of life
- Loss of appetite
- Weight loss

Contact your care team if you experience:
- Continued nausea/vomiting despite taking your anti-nausea medications as prescribed.
- Nausea that interferes with your ability to eat.
- Vomiting 4-5 times in a 24 hour period.
- Any symptom(s) that concern you.

There are different types of nausea and vomiting caused by cancer treatment: anticipatory, acute and delayed.

- **Anticipatory nausea** occurs when patients expect to feel ill. This nausea begins even before receiving treatment and may be triggered by sights, sounds or smells.
- **Acute nausea** occurs within the first few hours of receiving chemotherapy.
- **Delayed nausea** occurs in the days following chemotherapy treatment.

There are multiple anti-nausea medications available to prevent, lessen or relieve nausea and vomiting associated with chemotherapy. These medications can be administered both through your IV and/or by mouth. If you are receiving chemotherapy that is known to cause nausea and vomiting, you will receive anti-nausea medications through your IV before each treatment. You will also be given a prescription for anti-nausea pills to take at home if needed.

Other ways to help ease nausea and vomiting are:
- Drink fluids throughout the day. Avoid caffeinated and alcoholic beverages. Try to sip on water, ginger ale, tea or sports drinks throughout the day.
- Eat small meals throughout the day, and eat before you get too hungry.

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• Eat bland foods such as toast and crackers.
• Avoid sweet, fried or fatty foods, as well as foods with strong odors.
• Avoid caffeine and smoking.
• Eat foods that are cold (avoid cold food if receiving Oxaliplatin as part of your treatment regimen) or at room temperature to avoid strong smells.
• Do not lay flat for at least two hours after eating. If you need to rest, do so sitting up or reclining with your head elevated.
• Relax and try to keep your mind off chemotherapy. Deep breathing, listening to music, reading a book or watching a movie may help.
Low Blood Counts

Chemotherapy can affect your bone marrow and can cause low blood counts. Your care team will monitor your blood counts frequently during your treatments. They will specifically monitor your:

- **White blood cells (neutrophils):** these blood cells help your body fight infection
- **Red blood cells (hemoglobin):** these blood cells carry oxygen throughout your body
- **Platelets:** help your blood clot

### Signs and symptoms of low blood counts:

<table>
<thead>
<tr>
<th>Low white blood cells (Neutropenia):</th>
<th>Low hemoglobin (Anemia):</th>
<th>Low platelets (Thrombocytopenia):</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Fever</td>
<td>• Fatigue</td>
<td>• Easy bleeding</td>
</tr>
<tr>
<td>• Infection</td>
<td>• Shortness of breath</td>
<td>• Easy bruising</td>
</tr>
<tr>
<td></td>
<td>• Dizziness/light-headedness</td>
<td>• Petechial rash</td>
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<tr>
<td></td>
<td>• Headache</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Pale skin</td>
<td></td>
</tr>
</tbody>
</table>

### Contact your care team if you experience:

- A fever of 100.5°F or higher.
- Petechial rash (pinpoint bruises).
- Easy bruising and/or bleeding.
- Significant fatigue/weakness.
- Headache.
- Dizziness or light-headedness or feel like you are going to faint.
- Increased shortness of breath.
- Any symptom(s) that concern you.

(616) 252-8100

If you develop low blood counts due to chemotherapy, they will recover with time. There are no vitamins or changes to your diet that can help build up your blood counts. There are, however, ways to protect yourself if your blood counts are low. Should your blood counts get too low, there are treatments available.

If you develop low white blood cells (neutropenia):
- Wash your hands and use hand sanitizer frequently.
- If you feel poorly, check your temperature.
- Stay away from large crowds and avoid people you know who are sick.
- Do not get manicures or pedicures.
- In certain circumstances, you may benefit from an injection to help boost up your white blood cells.

If you develop low red blood cells (anemia):
- Reserve your energy and get plenty of rest.
- If severe enough, you may require a blood transfusion.

If you develop low platelets (thrombocytopenia):
- Brush your teeth with a soft bristled toothbrush.
- Use an electric shaver instead of a razor.
- Be careful when using sharp objects.
- Do not use dental floss or toothpicks.
Pain

Pain is an unpleasant sensation that can affect most aspects of life, including physical functioning, daily activity, psychological and emotional status and social life.

Common causes of pain:
- Cancer
- Treatment from cancer (neuropathy, mouth sores)
- Injury
- Infection
- Post-surgical
- Medication side effects (muscle aches)

Complications of pain:
- Nausea
- Fatigue
- Loss of self/independence
- Depression
- Poor wound healing

Contact your care team if you experience:
- New or worsening pain.
- An inability to take pain medications as prescribed (unable to swallow pills, undesirable side effects).
- Minimal or no pain relief with current pain medications.
- Difficulty waking up or staying awake.
- Constipation, nausea or confusion.
- Any other concerning symptom(s).

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There are different types of pain and therefore different ways to treat pain. A personalized treatment plan for pain control will be developed for you by your care team. To assist your care team in managing you care, we encourage you to keep a pain diary. Please refer to the pain diary located under the “Resources” tab near back of this binder. Your diary should include details such as:

- Onset: When did the pain start? What was I doing when the pain started?
- Location: Where is the pain? Is it in one spot or is it all over an area?
- Quality: Is the pain knifelike and stabbing, is the pain burning or is the pain dull and constant?
- Intensity: Is the pain worse with activity and improved while at rest? On a scale of 0-10, 0 being the least and 10 being the most, how would you rate the pain? Refer to pain scale located under the “Resources” tab near back of this binder.
- Intervention: What activities have helped to lessen the pain? What are the name and dose of medications you have used to treat the pain?

Pain can be treated with medications, conservative measures or a combination of both.

Types of medications that can treat pain are: Tylenol®, NSAIDS, opioids, depression medications, steroids, nerve-directed pain medications and bone directed therapies. Please discuss with your care team prior to starting any pain medications.

Other ways to manage pain: rest, heat/ice, physical therapy, massage, acupuncture and radiation. Please discuss with your care team prior to beginning any intervention other than rest and heat/ice.
Peripheral Neuropathy

Neuropathy is the medical term used to describe the sensation of numbness and/or tingling. Patients can describe neuropathy symptoms in different ways such as: tingling, burning, weakness or numbness – all of which can be painful. Patients also can report:

- Inability to feel hot or cold.
- Inability to feel pain.
- Weak or achy muscles.
- Loss of balance.
- Difficulty buttoning clothes.
- Difficulty picking up objects (like a pen or pencil).
- Muscle cramps.
- Constipation.

Neuropathy symptoms typically start on fingertips and toes and can gradually spread over time.

**Common causes of neuropathy:**
- Certain chemotherapies
- Diabetes
- Certain blood disorders
- Pinched nerve
- Vitamin deficiencies
- Alcohol abuse

**Complications of neuropathy:**
- Loss of function/independence
- Treatment changes and/or delays
- Infections

**Contact your care team if you experience:**
- Any of the above symptoms.
- Pain that is unrelieved with current pain regimen.
- Any symptom(s) that concern you.

Some people have neuropathy symptoms before beginning chemotherapy. It is important to know what your neuropathy symptoms are at baseline and to let your care team know if these symptoms worsen after treatment has begun.

Your care team will evaluate you for neuropathy symptoms prior to each treatment. It is important to inform your care team as soon as you begin experiencing any of the above symptoms. Based on the severity of the symptoms, adjustments may be made to your treatment plan to prevent the neuropathy from getting worse. Nerve damage is often temporary and may diminish over time; however, it can be irreversible.

If symptoms begin to develop, we ask that you take the following precautions:

- Use caution when handling knives, scissors and other sharp objects.
- Wear sturdy shoes with soft soles.
- Walk slowly and use handrails when climbing stairs. Ensure there are no rugs or cords to trip over.
- Protect feet and hands from extreme cold.
- Wear gloves when working in the garden, cooking or washing dishes.

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continued on the next page
• Ensure water does not get too hot when taking a shower or washing dishes.
• Use potholders when cooking.
• Inspect skin daily (with focused attention to soles of feet) for sores or abrasions.
• Use caution when driving if your feet are affected.

There are treatments available to help treat nerve pain. Non-narcotic pain medications that specifically target nerve pain are available. Also, the use of certain anti-depression medications can be helpful with nerve pain. Physical therapy is also helpful in treatment of neuropathy pain. If symptoms are particularly bothersome, you may benefit from seeing our palliative care specialist.
**Constipation**

Constipation occurs when bowel movements become less frequent. Stools are hard, dry and difficult to pass.

**Common causes of constipation:**
- Medications (including chemotherapy and pain medications)
- Changes in diet
- Lack of fiber in your diet
- Dehydration
- Decreased physical activity

**Complications of constipation:**
- Abdominal pain and bloating
- Nausea and vomiting
- Decreased appetite
- Hemorrhoids
- Confusion (especially in elderly)
- Fecal impaction
- Bowel obstruction

**Contact your care team if you experience:**
- A fever of 100.5°F or higher.
- No bowel movement in 3 days.
- Nausea/vomiting in addition to constipation.
- Your stomach appears enlarged and feels hard to the touch.
- An inability to pass gas.
- Abdominal/stomach pain.
- Any symptom(s) that concern you.

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Everyone's bowel patterns are different, and it is important that you are aware of what is normal for you. A change from your normal pattern may require intervention.

Preventing constipation is important. These are recommendations to prevent or relieve constipation.
- Drink at least 8 cups of water each day.
- Incorporate high fiber foods into your diet, such as whole grain breads, vegetables and oatmeal. If you have undergone intestinal surgery, discuss a high-fiber diet with a physician prior to incorporating.
- Be active every day. This can include walking, riding a bike or yoga. If you cannot walk, ask about exercises that you can do while in a chair. Be sure to discuss with your physician before starting any exercise program.
- Follow your current bowel regimen if already in place.

Please contact your care team if your constipation persists despite the above recommendations. Treatment options are available and may include:
- Polyethylene glycol (Miralax®): 1 tablespoon powder mixed in 4-8 ounces of liquid once daily.
- Magnesium hydroxide (Milk of Magnesia®): 2 tablespoons once daily at bedtime.
- Docusate sodium (Colace®): 1 tablet once daily.
- Docusate + Senna (Peri-Colace® or Senna-S®): 1 tablet once daily at bedtime.

Use above recommendations with discretion. Consult your care team with any questions or concerns.
Diarrhea

Diarrhea is defined as loose or watery stools.

**Common causes of diarrhea:**
- Diet
- Infections
- Radiation and/or surgery to the abdomen
- Medications (specifically certain chemotherapies and antibiotics)

**Complications of diarrhea:**
- Dehydration
- Electrolyte abnormalities
- Rectal discomfort
- Weakness
- Dizziness
- Thirst
- Decreased urine output

**Contact your care team if you experience:**
- A fever of 100.5°F or greater.
- More than 3 loose stools a day for more than 24 hours.
- Dark yellow urine or are not urinating.
- An inability to drink liquids for more than 24 hours.
- Moderate to severe abdominal cramping, pain and/or bloating.
- Black stools or blood in stools.
- Dizziness or light-headedness.
- Any symptom(s) that concern you.

If you develop diarrhea, follow these recommendations:
- Eat small frequent meals throughout the day (5-6 small meals as opposed to 3 large meals).
- Meals should consist of low fiber foods, such as bananas, white toast, lean meats, canned fruit, yogurt (plain or vanilla), applesauce, white rice and cottage cheese.
- Drink 8-12 cups of clear liquids each day, such as water, clear broth, ginger ale, Jell-o® and Gatorade®.
- Avoid high fiber and gas forming foods/beverages, such as onions, cabbage, beans, raw vegetables and carbonated beverages.
- Avoid greasy foods, such as french fries, fried chicken and hamburgers.
- Limit caffeinated and alcoholic beverages. Avoid beer, wine and other types of alcohol.
- Keep your rectal area clean and dry. Following each bowel movement, clean skin around rectum gently with warm water or soft wipes. Dry gently and completely.

Please contact your care team if your diarrhea persists despite the above recommendations.

Treatment options are available and they include:
- Loperamide (Imodium AD®): 2 tablets with a full glass of water after first loose stool. Take 1 tablet with a full glass of water after each loose stool thereafter. Do not take more than 8 tablets in 24 hours. This medication can be purchased over the counter at a local pharmacy.
- Diphenoxylate-Atropine (Lomotil®): Only available by prescription. If prescribed, take as directed by your care team.

Use the above recommendations with discretion, and consult your care team with any questions or concerns regarding above medications.
Mouth Sores

Mouth sores may occur with certain cancer therapies. This can happen because chemotherapy and radiation target rapidly dividing cells, both healthy and cancerous. Rapidly dividing cells include: mucous membranes (mouth, gastrointestinal tract), hair and nails. Patients that receive head and/or neck radiation are more likely to have mouth sores. Once cancer treatment is complete, mouth sores typically resolve within a few weeks.

<table>
<thead>
<tr>
<th>Common causes of mouth sores:</th>
<th>Complications of mouth sores:</th>
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<tr>
<td>• Chemotherapy</td>
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<td>• Radiation therapy</td>
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<td>• Poor oral hygiene</td>
<td>• Difficulty eating and drinking</td>
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<td>• Poor immune system</td>
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Contact your care team if you experience:

- A fever of 100.5°F or greater.
- Sores/blisters in mouth, tongue and lips.
- Inability to eat/drink due to mouth pain.
- Any symptom(s) that concern you.

Good oral care is the first step to prevent complications should you develop mouth sores. The goal of good oral care is to prevent infections and to decrease the duration and severity of mouth sores. It is important that you work closely with your care team to manage the side effects.

Listed below are recommendations that promote good oral hygiene and management of mouth sores.

- Inspect your mouth/tongue daily for redness and sores.
- Use a soft bristle toothbrush and brush upon waking, after eating and prior to bedtime.
- Avoid mouth rinses that contain alcohol. This will dry out the lining of your mouth.
- Rinse your mouth 3-4 times daily with a baking soda or salt water mixture. Mix ½ teaspoon baking soda or salt with 8 ounces of water.
- Apply lip moisturizer throughout the day to avoid dryness and cracking.
- Suck on sugar-free hard candies or chew gum to increase saliva production.
- If you wear dentures, make sure they fit well and keep them clean. Also limit the length of time that you wear them.

If mouth sores should develop despite the above measures you may find the following dietary recommendations beneficial:

- Avoid juices and foods that contain citric acid (tomatoes, oranges, lemons, grapefruits, etc).
- Avoid alcoholic beverages and tobacco products.
- Choose foods that are moist, soft and easy to chew or swallow.

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• Soften food with gravy, sauces, broth, yogurt or other liquids.

• Eat foods that are at room temperature. You may find that warm or hot foods cause increased discomfort to your mouth/throat.

• Avoid sharp or crunchy foods such as potato chips, corn chips and tortilla chips.

• Avoid spicy foods such as hot sauces, salsa and chili.

Some patients may require prescription strength mouth wash, antibiotics and/or pain medications for management of mouth sores. Please talk to your care team if your mouth sores are problematic.
Fatigue

Fatigue is one of the most common side effects of cancer and its associated treatment. Fatigue and tiredness are similar but different. Tiredness is an expected feeling after certain activities and resolves/improves with rest. Fatigue is persistent and not relieved by rest. Cancer and treatment related fatigue is often described as feeling extremely tired, weak and having no energy despite adequate rest.

The exact cause of cancer related fatigue is unknown. It is likely caused by a combination of one or more of the following:

- Cancer itself
- Surgery
- Chemotherapy
- Radiation therapy
- Anxiety/depression
- Nutritional deficiencies
- Anemia (too few red blood cells)
- Medications
- Dehydration
- Poor sleep

Complications of fatigue:

- Decreased overall well-being
- Treatment delays
- Loss of self/independence

Contact your care team if you experience:

- Significant fatigue/weakness and are unable to take care of your daily needs.
- Any symptom(s) that concern you.

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The best way to manage fatigue is to treat the underlying cause. Unfortunately, the exact cause is not always easy to identify. Below are recommendations to help manage the effects of fatigue.

- **Plan time to rest.** You may feel better when you rest (10-15 minutes) or take a short nap (less than one hour) during the day. Too much sleep during the day can make it difficult to sleep at night, so ensure your rest/nap periods during the day are short.

- **Prioritize.** Save energy for things that are important so you can focus your energy on those important tasks. Consider delegating tasks that you view as less important.

- **Maintain good nutrition.** Fatigue is often worse if you are not eating enough or if you are not eating a balanced diet. Foods high in protein and calories will help you maintain strength. Our dietitian will meet with you throughout treatment and help you design a balanced nutritional plan to fit your needs.

- **Stay well hydrated.** A minimum of eight cups of fluid per day will help prevent dehydration. Fluids should not contain caffeine or alcohol. Also be aware of sugar contents in your fluids. Try to drink low sugar/no sugar beverages.

- **Be active.** Even during treatment, it is often possible to exercise. Taking short walks and getting light exercise can increase your energy level and improve fatigue. Be certain to talk to your care team prior to beginning any new exercise regimen.

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• **Manage stress.** You may need to manage your expectations. For example, if you have a list of ten tasks you want to accomplish today, pare it down to three and leave the remaining tasks for other days. Having a sense of accomplishment can reduce stress. Relaxation techniques such as deep breathing can reduce stress and minimize fatigue. If your stress seems unmanageable, be sure to discuss with your care team.

Through it all, it is important to remember that cancer related fatigue can happen all at once or little by little. People experience and feel fatigue in many different ways. Though you can learn from others who have previously experienced cancer, you may feel more or less fatigue than someone else who received similar treatment. Cancer related fatigue is the reality of the person experiencing it, and severity of fatigue should not be compared to others.
# MY MEDICATIONS

Allergies and type of reaction: ________________________________________________________________

Pharmacy: ________________________________________________________________

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BENEFITS OF GOOD NUTRITION DURING CANCER TREATMENT

Good nutrition is essential to fighting cancer and to the success of your treatment. Your treatment and illness can change the way you eat and often change the way your body handles certain foods and uses nutrients.

The nutrients your body needs varies from person to person. Your care team will help to identify your nutritional goals and to create a personalized plan for your specific needs.

The benefits of good nutrition throughout your treatment include:

- Feeling better.
- Improving and maintaining your strength and energy.
- Preserving your weight and your body’s supply of nutrients.
- Tolerating treatment-related side effects.
- Lowering infection risk.
- Promoting healing and recovery.

Good nutrition is a combination of protein, carbohydrates, fat, water, vitamins and minerals.

Safety Considerations

There is a common misconception that only safe products are sold in stores. This is not always true. The FDA does their best to regulate products but can only pull those where it has been proven the product is unsafe.

Be sure to tell your doctor about any over-the-counter products that you use or are considering using. Take the bottles to your appointment with you so you can talk about doses, ingredients and other important information.

Protein

Protein aids in growth and repair of body tissue, and supports a healthy immune system. A lack of protein in your diet could result in your body breaking down muscles for the fuel it needs. Absence of protein could result in a longer recovery time, as well as a lower resistance to infection. People with cancer often need more protein than usual. Extra protein is usually needed after surgery, chemotherapy or radiation therapy to help heal tissue and fight off infection.

Good sources of protein include:

- Fish
- Poultry
- Lean red meats
- Eggs
- Dairy products
- Nuts and nut butters
- Dried beans
- Peas and lentils
- Soy foods

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Fats
Fats and oils are made of fatty acids and serve as a source of energy for the body. Your body breaks down these fats and uses them to store energy as well as insulate body tissue and transport some types of vitamins through the blood.

There are both good and bad types of fats. You should be choosing monounsaturated and polyunsaturated fats more often than saturated and trans fats.

Monounsaturated fats are mainly found in vegetable oils like olive, canola and peanut oils.

Polyunsaturated fats are mainly found in vegetable oils like safflower, sunflower, corn and flaxseed oils. These good fats are also the main fats found in seafood.

Saturated fats are mainly found in animal sources like meat and poultry, whole or reduced-fat milk, cheese and butter. Some oils like coconut, palm kernel oil and palm oil are saturated. Saturated fats can increase your risk of heart disease and raise your cholesterol. Less than 10 percent of your calories should come from saturated fats.

Trans-fatty acids are formed when vegetable oils are converted into solids. Some of these products can include margarine or shortening. Trans fats come from snack foods and baked goods that are made with partially hydrogenated vegetable oil or vegetable shortening. These fats can also be found naturally in some animal products including dairy products. Consuming too many trans fats can raise your bad cholesterol and lower good cholesterol. You should avoid trans fats as much as possible.

Carbohydrates
Your body’s main source of energy comes from carbohydrates. They create the fuel your body needs for physical activity and proper organ function. Fruits, vegetables and whole grains are the best sources of carbohydrates for your body. These same carbohydrates will also provide necessary vitamins, minerals, fiber and phytonutrients to your body’s cells. Phytonutrients are chemicals that are often found in plant-based foods. These chemicals are not necessary to live but are known to promote health.

Sources of carbohydrates include:
- Bread
- Potatoes
- Rice
- Pasta
- Cereals
- Corn
- Peas
- Beans

Whole Grains
Whole grains and food made from whole grains contain all the necessary parts and naturally occurring nutrients of the entire seed grain. Quinoa, brown rice and barley are whole grains that can be used as side or main dishes of a meal. Other sources of whole grains can include, cereals, breads and flour.

continued on the next page
When seeking out foods that contain whole grains you should look for key words such as:

- “Whole-grain”
- “Stone-ground”
- “Whole-ground”
- “Whole-wheat flour”
- “Whole-oat flour”
- “Whole-rye flour”

You should note that some bakeries use a mixture of white flour and whole-wheat flour and still label it “whole wheat.” You should always reference the ingredient list to be sure. Breads that do not contain refined flour will be labeled “100 percent whole wheat.”

**Fiber**

The part of plant foods that your body can’t digest is called fiber. There are two types of fiber: insoluble and soluble. Insoluble fiber supports quick movement of food waste out of the body. Soluble fiber binds with water in the stool to help keep the stool soft.

**Water**

Water and liquids or fluids are essential to your health. All cells in the body need water to function. Dehydration is when your body does not have as much fluid as it should. Dehydration can be caused from a lack of water intake or loss of liquid. Loss of liquid can result from vomiting or diarrhea. The fluids and minerals that help keep your body working can become dangerously out of balance due to dehydration.

Your body gets water from the foods that you eat, as well as additional water intake. A person should drink about sixty-four ounces of liquid each day. This equates to eight, 8-ounce glasses per day. This amount of liquid ensures that your body and its cells get the necessary amount of water to stay functioning.

Extra fluids may be needed when you are vomiting, have diarrhea, or just aren’t eating enough. Note that all liquids including soup, milk, ice cream and gelatin count toward your fluid intake goals.

**Vitamins and Minerals**

Proper function of the body relies on small amounts of vitamins and minerals. They help the body use the energy (calories) found in foods. Most of the necessary vitamins and minerals can be found naturally in foods but are also sold as supplements in pill and liquid form.

A balanced diet with enough protein and calories usually gets plenty of vitamins and minerals. Cancer treatments and side effects can make it hard to consume a balanced diet. If you think a vitamin or supplement could be right for you, be sure to discuss with your doctor first. They may suggest a daily multivitamin if your food intake has been limited for a long period of time.

Be sure to discuss a vitamin or supplement with your doctor first. Large doses of some vitamins, minerals or dietary supplements can be harmful to your health. In fact, large doses of some vitamins and minerals may make chemotherapy and radiation therapy less effective.

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Antioxidants

Antioxidants protect the body from agents called ‘free radicals.” Free radicals are capable of attacking healthy cells in your body. The damage caused by free radicals can contribute to cancer and heart disease. Antioxidants are capable of stabilizing or deactivating free-radical cells before they can attack healthy cells.

Antioxidants include:

- Vitamin A
- Selenium
- Vitamin D
- Zinc
- Vitamin E
- Some enzymes that absorb and attach to free radicals, preventing them from attacking normal cells

If you want to take in more antioxidants, your doctor can recommend eating a selection of fruits and vegetables that are high in antioxidants.

You should talk to your doctor before taking large doses of antioxidant supplements. Large does are not usually recommended during chemotherapy or radiation therapy.

Phytonutrients

Phytonutrients or phytochemicals are thought to have health-protecting qualities. Phytonutrients are chemicals that are often found in plant-based foods. They are also known to have antioxidant properties.

These include plant compounds such as:

- Carotenoids
- Resveratrol
- Lycopene
- Phytosterols

These can be found in fruits and vegetables, or other things made from plants like tofu or tea. It is not recommended to take phytonutrient supplements. Instead, they should be consumed by eating foods that naturally contain phytonutrients.

Herbs

Herbs have been used to treat illnesses for hundreds of years. Herbs can be found in many products including:

- Pills
- Teas
- Liquid extracts
- Ointments

While many of these products are harmless and safe to use, others can be harmful to you. Some may cause harmful side effects and others could even interfere with your treatment and recovery. If you are thinking about using products containing herbs, consult your oncologist, dietician or nurse first.
TIPS FOR BETTER NUTRITION THROUGHOUT YOUR TREATMENT

General Nutrition Tips

- Eat a well-balanced diet - see well balanced plate for guidelines.
- If you are unable to eat normally, try to eat eight small meals and snacks throughout the day. Choose foods that are easy to prepare and easy to eat.
- If you find that you don’t like how meals taste or that they are difficult to eat, try chopped or ground meats with sauce or in a casserole. Chicken and fish are great options. You can also try substituting the meat with cheese or eggs.
- Fruits and juices are often easy to consume and could help perk up your taste buds for other foods.
- Don’t be afraid to rely on your friends and family around you to help shop for and prepare meals. Be sure to tell them if there are certain foods that they should avoid.
- Breakfast is the most important meal of the day! A big, well-balanced breakfast could help you keep your energy up throughout the day.
- Keep commercially prepared liquid medical nutritional supplements or easily tolerable food like yogurt, cottage cheese or cheese sticks on hand for those days that you just don’t feel like eating.
- Constipation can contribute to a poor appetite. For relief, try adding one or two tablespoons of wheat bran to your food. You can also try drinking warm prune juice three or four times a day. If these options don’t help, talk to your doctor for more options.
- If you are physically able, try to have some form of physical activity like walking or lightly exercising.

Concerns to share with your doctor

- You should tell your doctor if you have pain, diarrhea, nausea or vomiting that are not controlled by your prescription medications.
- If you have constipation, ask your doctor if you should start a daily bowel care program. This could include stool softeners or laxatives.
- You should tell your doctor if you begin to have side effects due to over-the-counter products such as wheezing, itching, tingling or numbness in your limbs. If these side effects occur from an over-the-counter product, stop taking the product and contact your doctor right away.
Nutritional Recommendations to Reduce Side Effects of Medications

**Constipation**
Slowly increase the fiber in your diet. Include foods like cooked vegetables, cereals such as oatmeal, fresh fruits and whole grain breads.

**Loss of appetite**
Try to eat small meals or snacks of easily-tolerated foods six to eight times per day.

**Dry mouth**
Drink at least eight cups of water every day. You can also try unsweetened teas, popsicles, sherbet and cereals. Rinse your mouth several times per day with this mixture: one teaspoon of baking soda, three-quarter teaspoon of salt, and one quart of water.

**Dry mouth with taste changes or unpleasant tastes**
Try including citrus foods if tolerated to increase saliva production. Include fruits such as lemons, oranges, limes or grapefruits. You can also rinse your mouth with the baking soda, salt and water mix mentioned above.

**Nausea, vomiting or diarrhea**
Take your medication with food if allowed - don’t forget to check the label of your medication bottle for instructions. Try not to take medications on an empty stomach unless your doctor specified not to do so. Eat small, frequent snacks of easily tolerated food such as jello, crackers, dry cereal, toast, scrambled eggs or cottage cheese.

**Unplanned weight gain**
Decrease portion sizes, especially of high-calorie foods such as fried foods and foods with high sugar content, gravies, cheese, sugary drinks and processed sweets.

**Risk of steroid induced diabetes**
Avoid or limit concentrated sweets such as regular sodas, candies, juices, and cookies or cakes.
## SOFT AND MOIST HIGH PROTEIN MENU IDEAS

### Eggs and Egg Dishes

- Hard-boiled eggs
- Custard
- High Protein Gelatin

Other: ____________________________________________________________________

### Meat Salads

- Chicken salad
- Roast beef salad

Other: ____________________________________________________________________

### Soft Meats

- Beef stew
- Chicken pot pie
- Ground hamburger

Other: ____________________________________________________________________

### Soft Cheese Foods

- Cheese cakes
- Cottage cheese
- Cheese sauce on vegetables

Other: ____________________________________________________________________

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continued on the next page
Milk and Dairy Foods

- “Double strength” milk
- Smoothies
- Creamy hot cereals
- Eggnog (pasteurized, not homemade)
- Hot cocoa made with milk
- Powdered milk mixed into casseroles

Other: ____________________________________________________________________
__________________________________________________________________________

Soups

- Cream of chicken
- Cream of tomato
- Cream of mushroom
- New England cream chowder

Other: ____________________________________________________________________
__________________________________________________________________________

Legumes

- Baked beans
- Hummus
- Pork & beans

Other: ____________________________________________________________________
__________________________________________________________________________
WHAT’S ON YOUR HEALTHY PLATE?

Fill 1/2 of your plate with non-starchy vegetables.
- Spinach, carrots, lettuce and other greens.

Fill 1/4 of your plate with starchy foods.
- Whole-grain bread, rice and pasta

Fill 1/4 of your plate with your choice of protein.
- Grilled chicken, fish, lean beef or pork
COMMUNITY SERVICES

Gilda’s Club
Gilda’s Club Grand Rapids provides free emotional healthcare to children, adults, families and friends on any kind of cancer journey or those grieving the death of someone in their life due to any cause.

Website: http://www.gildasclubgr.org/
Grand Rapids Address: 1806 Bridge St NW  |  Grand Rapids, MI 49504
Lowell Address: 314 S Hudson St SE  |  Lowell, MI 49331
Phone: 1.800.326.1419
Phone: 616.453.8300

Making Choices Michigan
Making Choices Michigan creates a community culture where it is acceptable to talk about health care choices, including end of life, and to respect and honor those choices. They encourage and facilitate advance health care planning by the people of West Michigan.

Website: http://makingchoicesmichigan.org/
Address: 695 Kenmoor Ave SE - Suite B  |  Grand Rapids, MI 49546
Phone: 616.421.4840

Return2Wellness
Return2Wellness is dedicated to improving quality of life by using therapies that increase the vitality of the mind, body and soul.

Website: http://www.r2wnt.com/
Address: 701 E. Savidge Street, Suite #3  |  Spring Lake, MI 49456
Phone: 616.402.0268

Hope Lodge
Offering lodging and transportation to and from Grand Rapids cancer treatment centers free of charge, the Hope Lodge is a home-away-from-home for adult cancer patients and their caregivers who must travel to Grand Rapids for treatment.

Website: https://www.cancer.org/treatment/support-programs-and-services/patient-lodging/hope-lodge/grand-rapids.html
Address: 129 Jefferson Ave. SE  |  Grand Rapids, MI 49503
Phone: 616.551.4000

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American Cancer Society
The American Cancer Society is on a mission to free the world from cancer. ACS funds and conducts research, shares expert information, supports patients and spreads the word about prevention. All so you can live longer — and better.
Website: https://www.cancer.org/
Address: 129 Jefferson Ave SE  I  Grand Rapids, MI 49508
Phone: 616.364.6121

Camp Bluebird
Bluebird hosts five weekend retreats, including offerings for newcomers, couples (a survivor and a caregiver) and a reunion gathering. They also hold monthly support groups in Spring Lake/Grand Haven and Holland, including a Spanish speaking group.
Website: https://www.bluebirdmi.org/
Office Address: 917 W. Savidge Street, Suite #37  I  Spring Lake, MI 49456
Retreat Address: Camp Geneva, 3995 Lakeshore Dr North  I  Holland, MI 49424
Phone: 616.847.0839

Look Good Feel Better®
Look Good Feel Better is a non-medical, brand-neutral public service program that teaches beauty techniques to help them manage the appearance-related side effects of cancer treatment. The program includes lessons on skin and nail care, cosmetics, wigs and turbans, accessories and styling.
Website: http://lookgoodfeelbetter.org/
Address: Programs Happen at different locations
Phone: 1.800.395.LOOK (5665)

Road to Recovery/American Cancer Society Transportation
The American Cancer Society Road To Recovery program provides transportation to and from treatment for people with cancer who do not have a ride or are unable to drive themselves.
Website: https://www.cancer.org/treatment/support-programs-and-services/road-to-recovery.html
Address: N/A
Phone: 1.800.227.2345
Child Life Services

A medical visit can be tough for children, whether they’re the patient or visiting a patient. Metro Health’s Child Life team provides support to patients from infants to 18 years of age in a family-centered environment where patients, siblings and caregivers can interact and find healing.

Website: https://metrohealth.net/child-life-services/
Address: Metro Health Hospital, Level 6, 5900 Byron Center Ave. SW  |  Wyoming, MI 49519
Phone: 616.252.7946
Financial Coordinator

The financial coordinator at the Metro Health Cancer Center is here to help you alleviate the financial stress and strain that can occur during your care. Even with health insurance, the financial impact of cancer treatment can still be significant. Our financial coordinator will walk through the process with you and help identify assistance options.

Our financial coordinator can review materials, make sure you understand documents and offer assistance in a number of areas, including:

- Payment plans.
- Financial applications.
- Medical bills and your Explanation of Benefits (EOB).
- Billing or personal balances.
- Insurance benefits and obligations.
- Deductibles or copays with your insurance plan.
- Authorizations or appeals if services are denied.
- Helping uninsured patients with any applicable resources.

Use this area to keep track of bills and record any questions you may have before you meet with the financial coordinator.

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No appointment is needed. Just let any staff member know you’d like to meet with the financial coordinator.
**Survivorship**

“An individual is considered a cancer survivor from the time of diagnosis, through the balance of his or her life. Family members, friends, and caregivers are also impacted by the survivorship experience and are therefore included in this definition.”

*Adapted from the National Coalition for Cancer Survivorship*

**SURVIVORSHIP CARE**

As you complete cancer treatment, you may have uncertainties about what lies ahead. The transition to survivorship is unique for each person. Some cancer survivors take on a new outlook on life after cancer treatment ends. Others have difficulty returning to everyday life due to the changes that cancer and its treatment bring. In some ways, moving from active treatment into survivorship is one of the most complex parts of the cancer journey because it is different for each person.

**What to Expect**

Many survivors have mixed feelings about treatment ending. The safety net of regular frequent contact with the healthcare team ends. Some survivors miss this source of support. Anxiety and worry can increase during this time. Others have physical or psychological problems, sexual issues and fertility concerns. Many survivors feel guilty about surviving, having lost other loved ones to cancer. Some survivors feel uncertain about the future or have difficulty getting back into their work and relationships.

**Fear of Having Cancer Return**

Many survivors worry about their cancer coming back. This can lead to concern about common physical problems such as headaches, bowel changes, coughs or joint pain. It can be a challenge to know what is “normal.” Discussing the actual risks for recurrence with your doctor can be helpful. Also, learning what symptoms to report can lower anxiety, and keeping regular follow-up visits can provide a sense of control. These visits can sometimes be a source of stress, but this usually lessens over time.

**Relationships**

Family and friends are often changed by the cancer experience. Families can be overprotective or may become exhausted in their ability to be supportive. Friends may become closer or sometimes distance themselves. Recognizing and working through these changes is important to help get the support you need. Some people find that seeing a counselor or attending a support group can help.

*continued on the next page*
Side Effects of Cancer Treatments

Even after cancer ends, there are sometimes lingering physical and emotional effects. The type of side effects that you may have and how long they last depend on the exact treatment you received. Most side effects get better over time. Survivorship care can assist you in knowing what effects to expect and can help you to deal with or even prevent them. Long-term effects that some cancer survivors have include:

- Fatigue.
- Pain.
- Memory or concentration changes.
- Nerve problems such as numbness or tingling.
- Changes in sexual function or fertility.
- Lymphedema (swelling of arms or legs after removal of lymph nodes).
- Mood changes or depression.
- Increased risk for getting other cancers.
- Increased risk for late effects on other organs.

The Importance of Follow-up Care

Once cancer treatment is finished, follow-up care to watch for after effects or return of cancer is very important. After cancer treatment, survivors may have feelings that range from relief to worry to fears. During treatment, survivors feel like they are actively dealing with their cancer and have sense of support and security from their treatment team. Once this is over, there is often uncertainty about what is next. Many cancer survivors continue care with their oncologists while others return to their primary care provider. A treatment summary can provide helpful information to all of the medical providers involved with your care.

Treatment Summary and Survivorship Care Plan

A treatment summary can give you review of the type of cancer you had, what your pathology showed and how your cancer was treated. Your care plan will help you to understand what your follow-up care will be. It will also give you suggestions on ways to stay healthy as a cancer survivor.

Survivorship Care

Survivorship care focuses on the concerns that cancer survivors face after cancer treatment ends. It also focuses on staying well and healthy habits.

Your provider will schedule you a survivorship appointment soon after you have completed your treatment. This is a one-hour visit with a nurse practitioner who has expertise in Survivorship Care.
This visit will help answer your questions of the, “now what?” after your treatment is completed. It will include:

- An evaluation for post-treatment concerns.
- A Survivorship Care Plan, which is a record of the type of cancer you had and how it was treated, follow-up plan and other suggestions to stay well.
- Information on cancer prevention and management of long-term side effects.
- Suggestions for healthy lifestyle habits.
- Information on support groups, classes or other resources to help you live life as fully as possible after cancer treatment.
- Keeping your primary care doctor informed about your cancer care and follow-up plan.

Ask your doctor to schedule an appointment for a Survivorship Consultation.
At Metro Heath, we want to safely treat any pain you may have. Each person feels pain differently. We will use this tool to understand your level of pain. We will work with you using medicine and other methods to lessen your pain. We also will keep you as safe as possible from side effects of the medicine.

**PAIN RATING SCALE**


1. Very minor annoyance, with occasional minor twinges.

Mild Pain, Annoying. Pain is present but does not limit activity.

3. Annoying enough to be distracting.

Nagging Pain, Uncontrollable, Troublesome. Pain can be ignored if busy, but still distracting. Can do most activities with rest period.

4. Pain can’t be ignored for more than 30 minutes.

Miserable, Distressing. Pain can’t be ignored for any length of time, unable to do some activities but can still use telephone, watch TV or read.

5. Difficulty concentrating and interferes with sleep, but can function with effort.

Intense, Dreadful, Horrible. Unable to do most activities because of pain. Unable to use telephone, watch TV or read.

6. Unable to speak, crying out or moaning uncontrollably.

Worst Pain Possible, Unbearable. Unable to do any activities because of pain. Unconscious or want to pass out.
Escala de evaluación del dolor

En Metro Health, nos comprometemos a evaluar y tratar cualquier dolor que pueda tener durante su estancia. Su equipo de atención médica utilizará esta herramienta para identificar su nivel de dolor actual, y desarrollar un plan de tratamiento con usted que satisfaga sus necesidades de atención médica individuales y que lo ayude a sentirse mejor.

0  Sin dolor. Libre de dolor.

1  Molestia muy leve con punzadas menores esporádicas.

2  Dolor leve, molesto. El dolor está presente, pero no limita la realización de actividades.

3  Lo suficientemente molesto para distraer.

4  Dolor irritante, incontrolable, molesto. Se puede ignorar el dolor si la persona está ocupada, pero continúa distrayendo. Se puede realizar la mayoría de las actividades con periodos de descanso.

5  El dolor no se puede ignorar por más de 30 minutos.

6  Abatido, alarmante. El dolor no se puede ignorar durante un tiempo prolongado, no se pueden realizar ciertas actividades, pero se puede usar el teléfono, mirar la TV o leer.

7  Dificultad para concentrarse e interfiere con el sueño, pero puede continuar con esfuerzo.

8  Intenso, terrible, horrible. No se puede realizar la mayoría de las actividades por el dolor. No se puede usar el teléfono, mirar la TV o leer.

9  No se puede hablar; gritos y quejidos incontrolables.

10  Demasiado dolor, insoportable. No se puede realizar ninguna actividad por el dolor. Inconsciente o quiere desmayarse.
# MY PAIN ASSESSMENT RECORD

<table>
<thead>
<tr>
<th>Time pain began</th>
<th>Rate pain 0 - 10</th>
<th>What activity were you doing when the pain began? (What might have caused the pain?)</th>
<th>Name and amount of pain medication taken</th>
<th>Time pain medication taken</th>
<th>Rate pain 1-2 hours after taking medicine 0 - 10</th>
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Comments:

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**RESOURCES**
GLOSSARY OF TERMS

**Adjuvant Chemotherapy**: the use of drugs in addition to surgery and/or radiation to treat cancer.

**Alopecia**: the loss of hair from the body and/or scalp.

**Anemia**: low red blood cell count; symptoms include shortness of breath, lack of energy and fatigue.

**Anorexia**: absence or loss of appetite for food.

**Antiemetic**: a medicine that prevents or controls nausea and vomiting.

**Benign**: word to describe a tumor that is not cancerous.

**Biopsy**: the surgical removal of a small piece of tissue for microscopic examination to determine if cancer cells are present; a procedure for diagnosing cancer.

**Biotherapy**: treatment that uses the body’s own immune system to stop or slow the growth of cancer cells; some biotherapies work by stopping the blood supply to a tumor or by interrupting signals within the cancer cell.

**Blood Count**: the number of red blood cells, white blood cells or platelets in a given sample of blood.

**Bone Marrow**: the inner spongy tissue of bone where red blood cells, white cells and platelets are formed.

**Bone Marrow Biopsy and Aspiration**: a procedure in which a needle is inserted into the center of a bone, usually the hip or breast bone, to remove a small amount of bone marrow for microscopic examination.

**Bone Marrow Transplant**: replacement of bone marrow after high dose chemotherapy.

**Cancer**: a term for diseases in which abnormal cells divide without control and can invade nearby tissues.

**Carcinoma**: cancer that begins in the skin or in the tissues that line or cover the internal organs.

**Cell**: the basic structure of living tissue. All plants and animals are made up of one or more cells.

**Chemotherapy**: treatment that uses drugs to stop growth of cancer cells. Can be given orally; by injection; or by infusion.

**Clinical Trial**: a planned cancer study to investigate the effects of a specific type or combination of treatments in a human population.

**Complementary Medicine**: treatments that are used along with standard treatment, but not considered to be the standard; less research has been done for most types of complementary medicine. Complementary medicine includes acupuncture, dietary supplements, massage therapy, and meditation.

**Cytology**: study of cells under a microscope.

**Detection**: finding an abnormality in a person with or without symptoms.

**Diagnosis**: the process of identifying a disease by its characteristic signs, symptoms and lab findings.

**Diarrhea**: several loose watery stools.

**Gastrointestinal (GI)**: having to do with the digestive tract, which includes the stomach and intestines.

**Genes**: contain information that is inherited from parent to child and from cell to cell.
**Hormone:** substances secreted by various organs that help to control growth, metabolism and reproduction. (Used as treatment following surgery for breast, ovarian or prostate cancer.)

**Infusion:** a method of putting fluids/medications into the bloodstream.

**Injection:** the use of a syringe to “push” fluids into the body; often called a “shot”.

**Intramuscular (IM):** into muscle; some anti-cancer drugs are given by IM injection.

**Intravenous (IV):** into a vein; anti-cancer drugs are often given by IV injection or infusion.

**Leukemia:** cancer that starts in blood forming tissue, such as bone marrow and causes large numbers of abnormal cells to be produced and enter the blood.

**Lymphedema:** a condition in which extra lymph fluid builds up in tissues and causes swelling; may occur in arm or leg if vessels are blocked, damaged, or removed by surgery.

**Lymphoma:** cancer that begins in the cells of the immune system.

**Lymph Gland (Lymph Node):** part of immune system; filters impurities in the body and help body fight infection and disease.

**Malignant:** word used to describe cells that grow out of control; used to describe a tumor that is cancerous.

**Metastasis:** when cancer cells break away from their original site and spread to another area in the body.

**MRI (Magnetic Resonance Imaging):** a way to see the inside of the body with a special machine that uses magnets to produce images.

**Neoadjuvant:** treatment given as first step to shrink a tumor before the main treatment (for example: chemotherapy before surgery).

**Oncologist:** a doctor trained to treat patients with cancer.

**Palpable:** able to be felt by touch.

**PET (positron emission tomography) Scan:** a computerized image of the metabolic activity of the body tissues used to find disease.

**Platelet:** a substance in the blood necessary for clotting. Platelet transfusions are given to prevent or control bleeding.

**Port-a-Cath:** a device used to provide treatments; placed under the skin usually in chest. Attached to a catheter (thin, flexible tube) that is threaded into large vein right above right side of heart called the superior vena cava.

**Prosthesis:** an artificial replacement for a missing part of the body, such as a breast or limb.

**Protocol:** a plan for an experimental procedure or treatment.

**Radiation Therapy (Radiotherapy):** cancer treatment using radiation (high energy x-rays) to kill cancer cells and stop them from growing.

**Radioactive Implant:** source of high dose radiation that is put into and around a cancer to kill the cells.

**Red Blood Cells:** cells that supply oxygen to tissues throughout the body.
**Sarcoma:** cancer that begins in bone, cartilage, fat, muscle, blood vessels, or other connective or supportive tissue.

**Side Effects:** symptoms resulting from a treatment or treatments.

**Standard Treatment:** a cancer treatment currently used and considered effective on the basis of past studies.

**Stereotactic Radiosurgery (SRS):** one treatment or multiple treatments delivering a precisely focused, high-dose x-ray beam.

**Stomatitis:** sores on the inside of the GI tract, for example, the mouth, stomach and/or intestines.

**Total Body Irradiation (TBI):** radiation treatment of the entire body that is used to kill cancer and bone marrow cells. TBI prepares the body for bone marrow transplant (BMT).

**Tumor:** an abnormal growth of cells or tissues; tumors may be benign (non-cancerous) or malignant (cancerous).

**White Blood Cells:** the blood cells responsible for fighting infection.

**X-Ray:** radiant energy used to diagnose disease.