**Acute Oncology Clinical Nurse Specialist Service**



**Purpose**

The Acute Oncology Service aims to provide rapid assessment, treatment, and care coordination for patients experiencing acute symptoms or complications of previously undiagnosed cancer, known cancer or cancer treatment.

The Acute Oncology Team at Chesterfield Royal Hospital is nurse-led and consists of three Clinical Nurse Specialists who can be contacted on 01246 512470 and bleep 890.

The team work Monday-Friday 8am-4pm and are supported out of hours by the local cancer centre on-call Oncology team at Weston Park Hospital.

**Key Objectives**

* Provide timely access to specialist oncology advice via the specialist nurses
* Assess and support the management of cancer patients presenting with acute symptoms within 24 hours of admission (within dedicated service hours: Monday-Friday 8am-4pm)
* To actively support and promptly implement evidence-based protocols for management of acute oncology presentations and oncological emergencies to improve patient outcomes
* Monitoring patient progress during admission as appropriate
* Coordinating care and sharing information between emergency departments, inpatient wards, cancer site-specific clinical nurse specialists, specialist palliative care, and parent oncology teams based at Weston Park Hospital
* Support education and training of healthcare professionals across the organisation on the recognition and initial management of acute oncology presentations
* Audit of service performance and patient outcomes

**Acute Oncology indications**

**Type I:** Patient is admitted as an emergency for suspected new diagnosis of cancer:

* Pleural effusion
* Pericardial effusion
* Lymphangitis Carcinomatosis
* Superior mediastinal obstruction syndrome, including Superior Vena Cava obstruction
* Abdominal Ascites
* Hypercalcaemia
* Metastatic Spinal Cord Compression
* Cerebral space occupying lesion
* Any other cases where the A&E staff or acute medical team decide an urgent oncology assessment is needed

**Type II:** Patients with a known cancer who present as an emergency with an acute complication of non-surgical treatment – including systemic anti-cancer therapy (SACT) or radiotherapy.

Chemotherapy:

* Neutropenic sepsis
* Uncontrolled nausea and vomiting
* Extravasation injury
* Acute hypersensitivity reactions including anaphylactic shock
* Complications associated with venous access devices
* Uncontrolled diarrhoea
* Uncontrolled mucositis
* Hypomagnesaemia

Radiotherapy:

* Acute skin reactions
* Uncontrolled nausea and vomiting
* Uncontrolled diarrhoea
* Uncontrolled mucositis
* Acute radiation pneumonitis
* Acute cerebral/central nervous system disorder/oedema

Immunotherapy:

* Colitis
* Pneumonitis
* Adrenal crisis
* Hypophysitis
* Thyroid dysfunction
* Hepatitis
* Myocarditis
* Arthritis
* Skin toxicity
* Nephritis

Targeted therapy:

* Skin problems: rash, dry skin, or acne-like rash on your face, chest, and back that may itch or burn
* Changes to skin, such as photosensitivity and changes in hair growth
* Elevated liver enzymes, which may lead to a change in the drug dosage
* Diarrhoea or constipation
* Nausea and/or vomiting
* Fatigue
* Low red blood cell count, leading to fatigue
* Clotting or bleeding issues

**Type III a**: Patients with a known cancer that are acutely ill because of the disease itself:

* Pleural effusion
* Pericardial effusion
* Lymphangitis Carcinomatosis
* Superior mediastinal obstruction syndrome, including Superior Vena Cava obstruction
* Abdominal Ascites
* Hypercalcaemia
* Metastatic Spinal Cord Compression
* Cerebral space occupying lesion
* Any other cases where the A&E staff or acute medical team decide an urgent oncology assessment is needed

**Type III b:** Patients with a known Cancer that are acutely ill because of comorbidity

This group of patients will be managed by admitting medical teams but may require Acute Oncology Team input where a cancer diagnosis might impact on the medical management, to support care planning, and level/escalation of care and prognosis information.