



Welcome to Your Oncology Care Team

We offer a full range of state-of-the-art services for cancer care. Your doctor will help you decide which services are most appropriate.

Oncology Care Services:

- *Ambulatory Infusion Services staffed by Oncology Certified Registered Nurses*
- *Cancer Treatment Programs including Chemotherapy, Immunotherapies, Radiation and Surgical Intervention*
- *Diagnostic Imaging*
- *Genetic Counseling*
- *Nutrition Services*
- *Psychosocial and Emotional care from compassionate specialists*
- *Support Groups and Health Education*
- *Supportive Care Services*
- *Survivorship Care Planning*

*The Mission of the
Kaiser Permanente Santa Rosa Oncology Department
is to provide Excellence in the practice of
the Science of Medicine and the Art of Healing,
to serve with Commitment, Respect, and Compassion
and to nurture Hope, Trust and Dignity.*

This book describes chemotherapy and reviews ways you can help care for yourself during this time. Your cancer care team is available to discuss these issues with you.

The Oncology Department is located at:

KAISER PERMANENTE SANTA ROSA

MEDICAL OFFICE BUILDING 1, SUITE 160

401 Bicentennial Way

Santa Rosa, CA 95403

The Cancer Care Team, specializing in oncology care, consists of medical hematologists, registered nurses, pharmacists, dieticians, social workers, medical assistants, and laboratory services all located within the building.

Team members are all here to help you. Whenever you have questions or concerns, please give us a call. Someone will always be available.

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Contact Information



Phone Numbers for Chemotherapy Department

KAISER SANTA ROSA • ONCOLOGY DEPARTMENT

Chemotherapy Department Main line: 707-393-4634

Chemotherapy Department Hours: Monday–Saturday, 8:30 – 5:00

Press 1: To speak to the Chemo Charge Nurse

Press 2: To speak to the Chemo Scheduler – **to schedule your appointments**

- **Life threatening emergency: Call 911 or go to the nearest emergency room**
- **Evening and Weekend Services: 707-393-4044**
- **Doctor's Office: 707-571-3755**
- **Nurse Navigator: 707-393-4428**
- **Oncology Social Worker: 707-393-3749**
- **Chemotherapy Pharmacist: 707-393-2079**
- **Pharmacy Rx refills: 888-218-6245**

Meet Your Care Team

Chief of Oncology: Shafqat Akhtar, MD

After graduating from medical school and completing an Internal Medicine residency on the East Coast, I joined the Oncology fellowship training program at Harbor-UCLA Medical Center, Los Angeles, California. During my fellowship training, I did a rotation at one of the Kaiser Permanente facilities and was struck with the beauty and benefits of an integrated health care system. The system worked seamlessly. This rotation also afforded me the opportunity to get to know the Kaiser Permanente physicians and see how satisfied they were with their career choice. I was especially impressed with the liberty with which these physicians operated, without interference from administrators and other insurance regulators. It was therefore so easy to make decisions in the best interest of Kaiser Permanente members, unshackled by other influences.

Kaiser Permanente became a natural choice for me and after completing the fellowship, I joined The Permanente Medical Group. I have been at the Santa Rosa facility since 1999 and have been Chief of Oncology since 2001. Our department is staffed with able and compassionate staff members who place the interest of our members above anything else. I am happy to be part of the team and consider it a privilege to work alongside such a dedicated group of people.

Nicolaj Andersen, MD

I chose oncology as a subspecialty because I find working with cancer patients very interesting. The work requires building relationships with patients, which I enjoy. I strive to give cancer patients the reassurance and support they need in their situation. Significant breakthroughs have been made in both hematology and oncology over time, and this progress will no doubt continue. These breakthroughs have offered some cures, some better quality of life, increased survival, and not least of all, hope. But much work remains to be done. My practice philosophy is to be personal, informal, honest and compassionate. I try to be reassuring and consider the whole person's well-being. I believe it is extremely important to be responsive, so I am disciplined about following up with patients. I strive to provide excellent care, a listening ear, and an emotionally stable source of support and advice in what might prove to be difficult times for patients.

I grew up in Hundested, Denmark, a small town on the northwest coast of Sjaelland, Denmark's largest island. My father was a family physician in town and my mother a dentist. This exposure to medicine, while I was growing up, sparked my first interest in becoming a doctor. I moved to Copenhagen (Denmark's largest city) in 1990 to attend university and pursue becoming a medical doctor. After finishing my training at the University of Copenhagen's School of Medicine in 1997, I traveled to Indonesia for a vacation and met my wife, who is American and was living in San Francisco at the time. This was what first brought me to spend time in California. After a couple of years living in Copenhagen, we decided to move back to the U.S. I completed a three-year residency in Internal Medicine at Westchester Medical Center in New York and became increasingly interested in working with cancer patients. I thus decided to subspecialize in Hematology and Oncology and took a position as a fellow at Yale University for an additional three years.

I began to work with Kaiser Permanente in August 2005 and have gained valuable experience in clinical oncology since I joined. I enjoy reading about the latest news and developments in the field and I still have strong ties to

the hematology/oncology faculty members at Yale. I endeavor to be on the front edge of developments in my field. I chose to work at Kaiser Permanente because they have achieved an environment where both patients and doctors can more easily focus on patient care. Kaiser Permanente is a tightly-knit community of doctors in a multi-specialty practice, so there is excellent communication across specialties. This enables the patient to enjoy a continuity of care. Kaiser Permanente is also structured so that the patient comes first. For instance, there are no financial incentives that favor specific treatments at Kaiser Permanente. Therefore, the physician has the freedom to choose the treatment that is best for the patient. Furthermore, I do not find my energies diverted into other things at Kaiser Permanente, such as administrative work. When I go to work, I know I can focus on what I love to do: help patients.



Christine Kaiser, MD

I feel fortunate to be able to care for patients with cancer to help them through an inevitably challenging time in their lives. It is a privilege to be able to participate in continuing clinical research through Kaiser Permanente in hopes of improving care for all patients. I find it extremely rewarding to be involved in this constantly changing field of medicine at a truly exciting time when advances in cancer research are leading to a personalized approach for each patient as well as improved outcomes with longer survival and better quality of life.

I grew up in the Midwest and attended medical school at the University of Minnesota. I then completed a combined residency in Internal Medicine and Pediatrics at the University of North Carolina at Chapel Hill. I worked as a primary care physician in Seattle before moving back to the east coast for my fellowship training in hematology and medical oncology at Georgetown University/Washington Hospital Center. I had the opportunity to care for patients with a variety of malignancies at Washington, D.C.'s largest hospital in addition to spending time at both Georgetown University Hospital and the National Institutes of Health. I also served as the chief fellow of my fellowship program. I was then able to relocate to Northern California to join Kaiser Permanente in 2010. I am excited to be part of a group of high-quality physicians in an organization that has a goal of always improving the quality of health care for its members and their families.

I am particularly interested in the treatment of solid tumors but am also trained and board certified in Hematology. In order to provide the most up-to-date care for my patients, I follow medical journals focusing on medical oncology and hematology as well as national meetings for the American Society of Clinical Oncology and the American Society of Hematology.

**Jeffrey Ye, MD**

I came to Northern California from New York City, where I lived for more than two decades since I came to the United States. After finishing medical school in China, I came to America to pursue graduate studies in molecular biology. I was trained at the New York University School of Medicine and obtained a Ph.D. in molecular pharmacology. I then obtained post-doctoral fellowships to study at the National Institutes of Health (Bethesda, MD), and at the Rockefeller University (New York, NY), under the mentorship of a Nobel Laureate Dr. David Baltimore. Subsequently, I did an internal medicine residency at the New York University School of Medicine, and medical oncology/hematology fellowship at the Memorial Sloan-Kettering Cancer Center in New York City. After training, I worked for four years as a breast cancer attending physician at the Memorial Sloan-Kettering Cancer Center, while working in the laboratory at the Rockefeller University as an adjunct faculty member. I joined Kaiser Permanente in 2005 to pursue a full-time clinical practice.

Cancer medicine attracted me because I could directly apply my research training to patient care. In the past decade, the advance in molecular biology has completely changed the way we treat malignancies. New drugs and tools are coming from laboratories to the bedside with lightning speed. This makes it an exciting period for both Oncologists and, more importantly, for our patients, who are benefiting directly from the rapid progress in basic research. For cancer patients, we are providing treatments that were unimaginable even just five years ago.

As an oncologist, I am often asked on airplanes or at cocktail parties why I choose this specialty. People are afraid of cancer; therefore, they often have a hard time understanding why some would choose to work in this field. Although I do not always provide a direct answer, deep in my heart I know the reason: the patients. It is the patients that give us inspiration. The patients provide a reason for us to come to work every morning. We help cancer patients every day to obtain a cure for this potentially lethal disease. When a cure is not possible for the patient, we do our best to prolong their lives and provide them with the best quality of life possible with the most compassion that we can. By prolonging life, we give our patients a chance to benefit from the therapies that are on the horizon. I am proud of what we do. Our nurses, pharmacists, the supporting staff, and the doctors, working as a team, provide a high quality of care to the cancer patients in Santa Rosa and the neighboring communities.

**Ying Maggie Zeng, MD**

I developed my strong interest in Oncology when I was going through residency training. In the past decade, the advances in molecular biology have completely changed the way we treat malignancies. It is exciting to see patients with advanced cancers benefit tremendously from new drugs and technologies. Being an Oncologist, I am privileged to witness some of the exciting moments with the patients.

I choose to work with Kaiser Permanente because I like to work within an integrated medical system where a health care provider can more easily focus on patient care. More importantly, there are excellent communication and great collegiality across specialties.

I worked with Geisinger Health System in Pennsylvania for four years prior to taking the oncology position at Kaiser Permanente. That is a large health care system, similar to Kaiser Permanente, where I gained valuable experience in medical oncology especially in gastrointestinal malignancies by working closely with the colorectal surgeons and surgical oncologists.

I enjoy having the strong bond with my patients which is based on trust built over time. I believe oncology care should be informative, honest, personal and compassionate. Our goal is to cure the patient of cancer if we are able to, if not, the goal should be prolonging people's lives and minimizing the pain and suffering. Ultimately, I believe my role is to help patients to go through those difficult moments with their family members.



Fan Zhang, MD

As a general oncologist/hematologist, I treat all kinds of cancer diseases. I have close contact with academic cancer centers such as MD Anderson Cancer Center, Stanford University, UCSF and other resources.

After growing up in Southern China, I finished my medical training in Sun Yat Sen University of Medical Sciences, after which I became a Cardiologist for 5 years. In 1991, I entered University of Medicine and Dentistry of New Jersey (UMDNJ) for my doctorate training in Immunology. Soon I turned my interest to Cancer research,

working with Dr. George P. Studzinski, a well-known physician-scientist who, also like a father, led me to the success of my career. After my Residency in Long Island, New York, I continued my Oncology/Hematology fellowship at MD Anderson Cancer Center in Houston, Texas.

MDACC has been acclaimed as a leading cancer center in the United States, with its outstanding performance in cancer research, treatment, and patient care. It has its own 600-bed pure cancer inpatient hospital that provides trainees extensive opportunity to learn about all kinds of cancers, including some extremely rare types of cancer diseases. I was able to work in a large, unique cancer critical care unit as an inpatient physician. I also gained extensive outpatient experience through the center clinic and from LBJ hospital. I felt the institute provided tremendous research and academic resources to fellows.

I built my interest in Oncology/Hematology during my research life in Cancer biology and became an oncologist. After my fellowship, I chose to be a practicing oncologist instead of academic faculty. I feel more valuable to deliver direct patients care especially with my previous cancer research background. In 2003, I joined Kaiser Permanente as a specialist in Medical Oncology and Hematology.

Oncology Patient Navigator: Carrie Girvin, RN, OCN, ONN

My greatest passions are my family and my patients. I love every part of my job and I am committed to walking with patients on their journey, wherever that path may lead.

I have been in the field of medicine and have worked in Oncology almost two decades. I give a newly diagnosed cancer patient my continuous support and resources through treatment. At home, I enjoy baking bread, gardening, and biking and hiking with my two children and husband.

Oncology Social Worker: Zoe Koehler, MSW

Oncology Social Workers help patients and families deal with the experience of facing cancer. I can help you address practical needs like insurance coverage, financial assistance, and transportation by providing information and referrals to resources available within Kaiser Permanente and in the community. I can also offer support for more complex concerns such as adjusting to an illness, making treatment decisions, navigating cultural and spiritual issues, and talking with family members, children, friends, and even healthcare providers about cancer.

I'm available to meet with patients and family members, together or individually, to provide emotional support. I'm a resource to you throughout the continuum of your care, from discussing strategies to cope with anxiety, leading support groups, advocating for you, and helping navigate transitions in care.

I obtained a Master of Social Work degree from UCLA in 2013. Prior to this position, I have worked in hospice and palliative care. Getting to work with people facing illness is a great gift to me, as I continually learn so much from my patients. I've recently moved to this area from San Francisco to be closer to the redwoods. I enjoy walking in nature and reading short stories or non-fiction with a cup of hot tea in hand. I love this work and I look forward to meeting with you.

Supportive Care Services: Carla Fracchia, MD

I belong to the skilled nursing facility group of physicians and provide care to a variety of adult patients. I enjoy the diversity of this patient population and addressing the multitude of needs of our patients and their families.

I joined Kaiser Permanente, Southern California after my fellowship in Palliative Medicine in 2006. I moved to Kaiser Permanente Northern California in 2010. I continue to work for the organization because I believe in their mission to provide high-quality care to our members. I am a board-certified internist and received additional training in Geriatrics and Palliative Medicine. These three specialties are closely associated and enable me to take a comprehensive view of patient concerns and issues. With your help, I will attempt to provide the best care for you and your family and help you navigate our medical system.

Supportive Care Services: Grace Wu, MD

I have always been drawn to people's stories for as long as I can remember. This has remained true throughout my Internal Medicine Residency, Geriatric and Palliative Medicine Fellowships and time as a Hospitalist.

Now as a Palliative Care Specialist, I work with a robust team to get to know our patients and their stories as well as possible. In the midst of serious illness, there is often much to talk about. On one hand, I am curious to learn about people's recent stories - what conversations they've been having with their medical team, how things have been going at home, and what symptoms or stresses of serious illness we can help address. On the other hand, I am equally curious to learn about people's earlier stories, too - past experiences that helped shape who they are today, who their important people are, and more.

Getting to know our patients and their loved ones on a deeper, "whole person" level is an honor and a joy. It also helps us make sure that our patients are receiving the best care possible, while always keeping quality of life as a top priority. Nowadays, medical care is often so specialized that the same treatment might be the right fit for one person but not necessarily for another person. Our goal is to make sure all of our patients are receiving highly personalized care at all times - whatever our patients tell us feels right for them is what we help advocate for. And of course the better we know our patients, the better we can also help plan for future stories, as well.

It is a great privilege to be here at Kaiser Permanente Santa Rosa and back in the Bay Area where I grew up. I am surrounded by outstanding colleagues who care deeply about the work they do, and I truly believe that Kaiser Permanente's integrated system makes for better patient care.

Supportive Care Services: Yve Duran, MSW

I graduated from Lewis and Clark College and received a Masters in Social Work from Portland State University. I am a Licensed Clinical Social Worker and have an Advanced Certification in Hospice and Palliative Care-Social Work. I began my social work career providing community mental health services to children and families in Portland, Oregon. After my mother's diagnosis of stage IV cancer, I decided to move back to Sonoma County to be closer to family and help care for her. I began working as a medical social worker at a local trauma center in Santa Rosa. I quickly fell in love with hospital social work due to

the diversity of patients, working within a multi-disciplinary team, and being able to provide resources to help support people's health and wellness.

After nearly a decade as a hospital social worker, I came to Kaiser Permanente in 2010 to work with adults with chronic illness. Since that time, I have been an active member of the Bio-Ethics Committee and I currently co-facilitate our Family and Caregiver Support Group. My work evolved to include advance care planning conversations and helping grow our Life Care Planning program. This work provided a natural transition into palliative care and I officially joined the Outpatient Palliative Care team in 2015. My goal is to be a support and resource as well as ease the impact of illness on patients and their families. I feel privileged to be able to share a tender space with patients and families who are going through some of their most difficult and critical times. I am

fortunate to have the career of my dreams, and the pleasure of being a palliative care social worker with a fantastic team. I feel grateful to come to work each day with a team of smart, dedicated, and caring individuals who share the same vision and approach to patient and family centered care.

Supportive Care Services: Brian Griffiths, MSW, MPH

I was drawn to social work after experiencing the tragedies losses of the HIV/AIDS epidemic in the early 1990s and witnessing the fine work of the social workers who help people with AIDS live and die dignity and respect.

I studied at U.C Berkeley and received my dual Masters in Social Work and Public Health. My focus in my studies was on health policy and management, but I quickly learned after graduating that my real talents lie in direct patient care. After nearly a decade as a medical social worker at the Sonoma County HIV Clinic, I came to Kaiser where my focus expanded to all patients with suffering illness. I spent several years working as a hospital social worker before joining the Outpatient Palliative Care team in 2015.

My hope work is to ease suffering by providing patients and families with the support and resources they need to navigate their illness journey, and to accompany them on their path so they know they are not alone. I am to go to work with the team of professionals who cared deeply about providing quality care that considers the whole person.

I lived with my husband Pete and our menagerie of animals in the Hills to the west of Healdsburg, with our many dogs, chickens and our very special llama named Dali. Also a proud member of the Russian River Sisters of Perpetual Indulgence, where I am known by the name Sister Frances A. Sissy. I'm a native of Sonoma County and enjoy a weekly dinners with my parents in Graton, where I grew up.

Oncology Nutritional Services: Christina Fifer, MS, RD, CSO

Working with patients is a passion of mine. I enjoy meeting people and learning what their nutrition needs are. In working with me, we will come up with a nutrition plan together to contribute towards your health goals, whether that be prevention, delay, and/or management of diseases and/or conditions.

I have been happily employed as a Registered Dietician with Kaiser Permanente Santa Rosa since 1999. My formal training started with a Bachelor of Science degree in Food and Nutrition from San Diego State University in 1995. I then completed my dietetic internship at Patton State Hospital in San Bernardino County, CA, and passed the registration exam for dieticians in 1996. In 2004, I completed my Masters of Science degree in Human Nutrition at the University Of New Haven, CT via a satellite campus in San Francisco. In 2013 I became Board Certified in Oncology Nutrition. I assist patients in all stages of cancer, including prevention, nutrition during treatment, and in survivorship. Eating the right kinds of food during and after treatment can help one feel better and stay stronger. I look forward to meeting you!

Oncology Nursing Staff

Registered Nurses who staff the Oncology Department are dedicated to caring for you in all stages of cancer. The scope of oncology nursing spans from prevention to early detection to treatment, through symptom management and palliative care. Oncology nurses often serve as your first line of communication and help coordinate the many aspects of your care throughout cancer treatment.

All our nurses are chemotherapy and biotherapy certified and many are Oncology certified, which requires rigorous study and examination through the Oncology Nursing Society. Their collective goal is a high quality of life for all patients and their loved ones.

Oncology Medical Assistants

The Oncology Medical Assistants (MA) are always striving to improve our patients' treatment experience. They may be your first contact at a visit or assist in connecting you with the resources you need during your treatment. Our MA team works with the entire department to determine and deliver the ideal treatment for each patient.

Oncology Clinical Trials Department

At any one time, there are usually more than 30 cancer trials available for Kaiser Permanente patients within our Oncology Clinical Trials Program. Every year, more than 300 Kaiser Permanente patients in Northern California will enroll in an oncology trial, where they may be able to participate in new cancer treatments even before they are FDA approved and available to the general medical community.

95% of the clinical trials offered at Kaiser Permanente are multi-center trials being conducted at university medical school centers and other cancer treatment research centers across the United States. Kaiser Permanente participates in national trials through several national cooperative research groups and with pharmaceutical companies.

Choosing to participate in a clinical trial is an important, personal decision. It is often helpful to talk to a physician, family members, and friend about deciding to join a trial. The Clinical Trials Department in Santa Rosa consists of a Registered Nurse and a Data Manager who work closely with your physician and the rest of the Oncology team to coordinate your treatment options.

Pharmacy Services

The Oncology Pharmacists at Kaiser Permanente Santa Rosa are fully integrated members of your chemotherapy care team. The pharmacists work very closely with your physician, nurses, and social services team to ensure safe and appropriate drug therapy. Pharmacists assist in chemotherapy plan development, especially in IV chemotherapy design, oral chemotherapy teaching, and supportive care issues such as anti-nausea medication. The pharmacists also provide ongoing drug dosage safety checks in accordance with weight parameters, lab work, and interacting medication. Finally, our pharmacists work with staff in assisting with ongoing symptom management issues.

Primary Care Doctor: Contact Information: 	OTHER SPECIALISTS:
Medical Oncologist: Contact Information: 	Name: Specialty: Contact Information:
Radiation Oncologist: Contact Information: 	Name: Specialty: Contact Information:
Surgeon: Contact Information: 	Name: Specialty: Contact Information:
Oncology Nurse: Contact Information: 	Name: Specialty: Contact Information:

Oncology Social Worker:

Contact Information:

Name:**Specialty:**

Contact Information:

***What You
Need to Know
About
Chemotherapy***

WHAT IS CHEMOTHERAPY?

Chemotherapy is the treatment of cancer with medications. It is one of the methods of treating cancer and it may be used alone or together with surgery, radiation therapy, hormonal or biologic therapy.

There are many different chemotherapy medications, which may be given alone or in combinations depending on the type of cancer. There are many different types of cancer: some may not respond to chemotherapy while others may be kept under control for months or even years. Chemotherapy may help relieve symptoms caused by your cancer.

Key Terms:

Immunotherapy drugs stimulate the immune system to fight cancer cells

Targeted therapy drugs interfere with the function of specific cells

Chemotherapy drugs stop the growth of cancer cells by killing them or stopping them from

Your chemotherapy dose is calculated based on your height and weight. Chemotherapy doses and schedules may need to be altered during therapy. Your doctor will discuss your specific chemotherapy plan with you, reviewing the progress of treatment with you at regular intervals.

Immunotherapy Therapy (sometimes called targeted therapy, biotherapy, or biological response therapy) **is a broad category of anti-cancer therapies that use the body's immune system to fight cancer cells.** Immunotherapies are a relatively new addition to the family of cancer treatments.

Clinical Trials

New cancer treatment, including new forms of chemotherapy and medicines used to treat adverse effects of chemotherapy, undergo *clinical trials* to see if they are safe and effective. Approval of a drug by the Food and Drug Administration depends on the results of these clinical trials. Your oncology team will discuss available research opportunities with you. When studying experimental treatments, researchers want to know:

- Does the specific treatment work better than other treatments already available?
- What side effects does the treatment cause?
- Do the benefits outweigh the risks, including side effects?
- Which patients will the treatment most likely help?

During your treatment for cancer, your doctor may suggest that you take part in a clinical trial of a new treatment. You should know that scientists only conduct clinical trials when they have reason to believe that the treatment under study may indeed be better (or at least no worse) than other treatments. You will not receive a placebo (sugar pill) if a standard treatment is already available.

HOW CHEMOTHERAPY MIGHT AFFECT YOU

Chemotherapy medications affect the rapidly dividing cells in the body. In addition to cancer cells, rapidly dividing cells are present in the hair follicles, mouth, skin, the lining of the intestines and in the bone marrow where blood cells are made. Because chemotherapy medications affect normal cells, as well as cancer cells, some of the results may include unpleasant side effects. An absence of side effects has no bearing on the effectiveness of the chemotherapy.

Refer to your specific medication information sheets for a detailed description of the common and uncommon side effects of each of the medications you are receiving.

Effects Of Chemotherapy On Your Bone Marrow

Bone marrow is found at the center of bones, especially the skull, sternum, ribs, backbone, and pelvis. Bone marrow produces red and white blood cells and platelets, which are all rapidly dividing cells. They are held there until they mature. They are then released into the bloodstream to perform their vital functions. Because chemotherapy acts on these rapidly dividing cells, their production may be interrupted when chemotherapy is given. Therefore, the number of circulating cells in the bloodstream can become reduced over time, resulting in anemia (decreased red blood cell count), neutropenia (decreased white blood cell count), and thrombocytopenia (decreased platelet count).

During treatment, the term **nadir** may be used. This refers to the point when the cells in the body are at their lowest number. This is a predictable time, depending on the chemotherapy agent used. For example, one drug may have a nadir of 7-10 days. This means that 7-10 days after beginning chemotherapy, the red cells, white cells, and platelets will be at their lowest number in the bloodstream. After a period, the blood counts will begin to rise back to normal.

White Blood Cells And Infection

The *white blood cells* (WBC) help the body to fight infections. Chemotherapy kills both the cancer-producing cells and healthy, infection-fighting cells, which decreases your body's ability to fight infection. When the white blood cell count begins to drop below normal, this is called neutropenia. This is the time when chances of infection are the highest.

The following hints will help prevent and detect an infection:

- Avoid exposure to large groups of people and to people who are ill.
- Maintain good personal hygiene, including mouth care. If possible, take care of any needed dental work before you start chemotherapy.
- Wash your hands often during the day and especially before eating and after using the bathroom. Good hand washing is one of the first steps for avoiding infection.
 - This begins with soap and warm water.
 - Be sure to lather well and use friction to clean the surfaces.
 - This is best achieved by rubbing the hands together in a back-and-forth motion.
 - Include the nail beds and the webbed portions between the fingers.
- Try to keep the skin intact, since small cuts and bruises during the period of low white blood cells can harbor germs and be a good place for infection to start. Use gloves, potholders, sunscreen, etc., to protect your skin while performing necessary chores. If cuts and abrasions occur, clean the area well with soap and water. If cuts are not very deep, clean them with hydrogen peroxide and cover with a sterile bandage. Call your doctor's office for further directions.
- Food safety is important: wash fruits and vegetables, eggs should be cooked, meat should be well-done, and milk and juices should be pasteurized.

In most cases, the lowered WBC count will be mild and will correct itself as the bone marrow heals. Healing occurs between each chemotherapy course in most cases. In some instances, your doctor may recommend a medication called Zarxio™ to stimulate your bone marrow to make more white cells. You will be taught to administer this medication so that you can give it in the comfort of your home.

Remember, during your nadir you will want to avoid exposure to large groups of people and to people who are ill. Otherwise, continue your normal activities such as shopping, going to movie theaters, etc., unless otherwise instructed by a doctor or nurse in the clinic.

Important to Remember

Keep a thermometer at home and know how to use it
Report any fever of 100.5°F or more to your doctor

Early signs of infection may include

- *Fever above 100.5°F
- * Chills, shaking chills
- * New cough
- * Sore throat*
- *More than three loose stools in a day
- * Pain or burning with urination*

Be alert to these signs and notify your doctor if they occur

Platelets And Bleeding

Platelets are the blood cells which facilitate the clotting of blood to stop bleeding from an injury. Chemotherapy also destroys these clotting cells.

Some of the first signs of a low platelet count (thrombocytopenia) are constant bleeding from a cut and easy bruising. Some people notice bleeding from the gums after eating a meal or brushing their teeth. Heavy or prolonged menstrual bleeding, or blood in the urine or stool may also occur. You may notice small, pinpoint spots, often in clusters, known as *petechiae* inside the mouth or elsewhere on the body, such as the arms and legs.

Nosebleeds may occur. Apply pressure to the nostrils while remaining in an upright position. Apply ice to the nose, if necessary. If bleeding continues for longer than 15 minutes, contact your physician immediately.

Medications

Aspirin and some non-aspirin pain relievers such as ibuprofen (Motrin™, Advil™), naproxen (Aleve™), or celecoxib (Celebrex™), also called NSAIDs, make platelets less able to do their job. These medications should be avoided unless prescribed by your doctor. Many over the counter medications contain NSAIDs. Read the labels of any nonprescription medication prior to taking it to make sure it does not contain an NSAID. If you are unsure of the ingredients in any product you take, call your pharmacy.

Important to Remember: To Prevent Bleeding

- Avoid injury to the skin during the time when your platelets are low. Do not use a blade razor. An electric razor is best.
- Take care of your mouth. Use a soft bristle toothbrush. Avoid using dental floss until counts are back to normal.
- Be sure dentures fit properly to decrease irritation to gums. Rinse your mouth with a salt water solution to help keep it clean and promote healing.
- Bleeding can also be found in the stool when platelets are low. It is important to keep the stool soft and to refrain from straining. Straining can rupture tiny blood vessels in the rectal area and cause hemorrhoids. You may take a laxative or stool softener to keep your bowels soft and regular.

Red Blood Cells And Anemia

Chemotherapy may lower the red blood cells (RBC), causing anemia (low red blood cell count). Anemia occurs when the blood has too little hemoglobin. Hemoglobin is the part of the red blood cell that carries the oxygen needed by your body. A test of your complete blood count (CBC) will show a drop in hemoglobin if you have anemia.

When your red blood count is low, try to get more rest. Pace your activities.

Consult your doctor prior to taking any medications, including over the counter products, such as iron, for anemia. Eating nutrient-rich foods, taking iron and folic acid supplements can help. Specific treatments for anemia may include medications such as erythropoietin (Procrit™, Epogen™), darbepoetin (Aranesp™), blood transfusion, and iron supplements.

Anemia Symptoms you should tell your doctor about

- Chest Pain
- Dizziness, lightheadedness
- Shortness of breath
- Roaring or whooshing sounds in ears
- Weakness and decrease in energy (fatigue)
- Difficulty staying warm

Nausea And Vomiting

The foods you eat can make a big difference in how quickly you get well.

What you eat, the way you eat, and how you eat, may all cause nausea. Nausea is a common side effect of cancer treatment. Chemotherapy, radiotherapy, or cancer itself can stimulate it. Whether you have nausea and vomiting will depend on the chemotherapy you are receiving and will vary from patient to patients.

If you know someone who has received chemotherapy and had much discomfort, do not automatically think this will happen to you. Large amounts of food can make someone anxious and subsequently nauseated. The idea of sitting at a table for a large meal three times a day can be overwhelming. You may develop an aversion to certain foods and strong aromas may trigger nausea.

Fortunately, nausea can be managed through a combination of medications and behavioral changes. Medication may be prescribed by your physician to help control nausea. The medication will be chosen on an individual basis depending on your situation. Suppositories may be prescribed to take if you are vomiting. Do not take pills and suppositories together unless you have been specifically instructed to do so. Always follow the specific recommendations of your physicians when taking these medications as they may cause other side effects.

If nausea hits:

- Take deep breaths and relax.
- Chew ice chips until nausea has passed.
- Sip small quantities of water or a clear “flat” soda (such as ginger ale).
- As you feel better, gradually add other foods back into your diet.
- **You may benefit from eating some small, light meal one to two hours before chemotherapy to help prevent nausea and vomiting.**

Helpful hints during and after treatment

- Consider shakes or liquid nutritional supplements to help maintain your nutrition if you are unable to eat.
- Eat the largest meal at a time of day when you are least nauseated (morning for many people).
- Ask friends and family members to cook so you can avoid aromas in the kitchen.
- Avoid overfilling your stomach by eating small frequent meals (5-6), instead of 3 large meals each day.
- Eat and drink slowly, chew food thoroughly so it is easily digestible. Keep the room or house full of fresh air and free of offensive odors (cooking odors are a problem for many patients).
- Avoid sweet, spicy, fatty, or fried foods. Fresh vegetables should be cooked rather than eaten raw.
- Eat dry, bland food such as crackers or toast.
- Rest in a chair after eating; avoid reclining as this may trigger vomiting.

Diarrhea

Diarrhea means liquid (watery stools). It can occur after chemotherapy because of its temporary effect on the lining of the intestine.

Chemotherapy sometimes causes diarrhea as a side effect. This could be a sudden change of watery bowel movements or simply an increase in the number of loose stools you normally have.

Foods and liquid, you eat can pass too quickly through the intestine. This causes you to lose vital nutrients and fluids. You can become weak, dizzy, and lightheaded.

Call your Oncology Nurse if you are experiencing three or more diarrhea stools per day. (This would be three or more stools over what you normally pass daily).

You will need to alter your diet to help resolve this problem. A clear liquid diet works the best. This diet helps decrease the amount of work your intestine needs to do, plus it helps replenish the nutrients and fluid you need to get better.

Please use the list as a guide to what CLEAR liquids are best. Avoid carbonated beverages as they can make diarrhea worse.

CLEAR LIQUID DIET

- Apple Juice
- Water
- Tea
- Broth
- Sport Drinks (Gatorade™)
- Gelatin
- Soda pop (clear and flat)

BRAT DIET

- B: Bananas – ripe
- R: Rice – white and plain
- A: Applesauce - no cinnamon
- T: Toast – dry, no butter or jam

When you are ready to add solid food back into your diet, it is best to go slowly. A suggestion would be to start with the BRAT diet.

If you tolerate this well, without an increase in diarrhea, try adding some pasta, boiled or baked chicken and cooked vegetables. Avoid dairy products as they may make diarrhea worse.

Your doctor, nurse or pharmacist may recommend medications such as Imodium™ or Lomotil™.

TIP: Food and liquids are best tolerated if they are not too hot or too cold!

Constipation

Constipation is a symptom that has different meanings to different people. Most often, it refers to infrequent bowel movements (BM). It may also refer to a decrease in the volume or weight of stool; the need to strain to have a movement; a sense of incomplete evacuation; or the need for enemas, suppositories, or laxatives to maintain regularity.

For cancer patients, constipation is very common especially during treatment with narcotic pain medications, with certain chemotherapy drugs, with poor food/liquid intake, and with decreased exercise.

It is helpful if you try to include fiber-rich foods in your diet to help stimulate your bowel. Please see the accompanying list. Limit foods that can contribute to constipation such as cheese, meat, and white rice.

You will need to drink 6-8 glasses of liquid daily to keep your stool soft (i.e. water, soup, prune and other juices or popsicles). Drink a warm beverage about 30 minutes before the time of your usual BM.

FIBER RICH FOODS

- Whole grain breads
- Bran cereal
- Fruits
- Vegetables
- Barley
- Brown rice
- Prunes

Exercise helps stimulate bowel activity. Simple walking can be a big help. Try to establish a pattern of when you have a bowel movement. This will help train your body again. Be sure to act on any urge to have a bowel movement.

If your stool is too firm and uncomfortable to pass, you will want to consider taking a stool softener or laxative as a preventative measure. Avoid bulk laxatives such as Metamucil™ and Citrucel™ as they can make the problem worse.

Important to remember

- Simple exercise daily, such as walking, can help prevent constipation.
- Remember to drink 6-8 glasses of liquid daily.
- If you are on narcotic pain medication, you should be on a stool softener and laxative as a preventive measure.
- **AVOID BULK LAXATIVES!**

Mouth Sores

Many chemotherapy medications may cause the lining of the mouth to become dry, irritated and to form sores. These sores may also be found on your lips or in the back of the throat. This is called Stomatitis or Oral Mucositis. These may be painful and limit the kinds of foods you can eat. Mouth sores will generally heal within 3-7 days.

Simple Salt Water Rinse

- ½ teaspoon salt
- 8 oz (1 cup) of warm water

Prevent mouth sores and treat inflammation by rinsing your mouth with a salt water solution as soon as you notice mouth tenderness. It helps to clear food particles and improve circulation, which helps to keep the mouth clean. This will improve your taste and decrease bacteria. If possible, brush your teeth with a soft bristle brush after meals.

If you have sores in your mouth, burning sensations or notice more bleeding than usual when you brush or floss your teeth, you may want to just rinse your mouth 3-4 times daily. Soft toothettes (foam toothbrushes) may be helpful.

If you wear dentures, make sure they fit properly. If you develop mouth sores, you will want to leave your dentures out until they are healed.

We can prescribe a mouth rinse to coat and soothe your mouth. Ask your doctor, oncology nurse, or oncology pharmacist about this.

Helpful tips for Mouth Sores

- Running your toothbrush under hot water before brushing will soften it even more.
- Food and fluids that are lukewarm or cold or that have been pureed in a blender may be more comfortable.
- Avoid spicy, acidic and abrasive foods, caffeine, tobacco, as well as alcohol. This includes most commercial mouthwashes.
- Mix foods with gravy or sauces to make them easier to swallow.
- Supplement meals with high calorie, high protein drinks.

Fatigue

Fatigue is a feeling of being tired physically, mentally, and emotionally. It means having less energy to do the things you normally do or want to do.

Cancer-related fatigue is defined as an unusual and persistent sense of tiredness that can occur with cancer or cancer treatment. It may be chronic and interfere with usual activities. Cancer-related fatigue is more severe and more distressing than fatigue occasionally experienced by most of us under normal living circumstances. Rest may not relieve it.

Cancer-related fatigue can make being with friends and family overwhelming, and make it difficult to continue normal activities, work, or hobbies. You must use greater effort and more energy to do your usual activities. Don't get frustrated with yourself for not being able to do your normal tasks.

Education and counseling are part of treating fatigue and may help you learn how to conserve energy, reduce stress, and use the distraction to think about things other than the fatigue and the cause of the fatigue. If the cause of the fatigue is known, treatment will be directed to the cause. Some treatable causes include anemia, insomnia, or nutrition problems.

Some ideas to deal with Fatigue

- Pace yourself.
- Rest often.
- Pursue low-stress hobbies.
- Be patient with yourself.
- Seek help from your medical care team.
- Exercise helps reduce fatigue related to cancer.

Use your energy for those really important things you want to do!

Depression

Many of the effects of chemotherapy make it seem like your life is out of control. It is very common to feel angry or depressed about this. Talking about your feelings can help. Sometimes, those close to you may also benefit from counseling. Please see the section on support groups and resources.

Insomnia

Certain cancer treatments and medications may contribute to insomnia. Insomnia can make it difficult to fall asleep and stay asleep. For instance, you may awaken multiple times during the night or early in the morning and not be able to get back to sleep. This condition can lead to fatigue, memory, and concentration problems, as well as mood disturbances. Treatment for insomnia may include pharmacological, as well as non-pharmacological approaches.

Hair Loss

Hair loss is a side effect of some, but not all chemotherapy medications.

The amount of hair loss will depend upon the medications you receive and will vary from person to person. You may experience partial or complete hair loss.

With chemotherapy medicines that are most likely to produce significant hair loss, hair will begin to come out quickly in about 17-20 days after the first dose with most of the hair gone from the head in 3-4 weeks. Some people describe that their “hair hurts” just prior to the hair coming out. This is normal. There may be scalp itching or discomfort after hair loss, and this is usually temporary.

If hair loss does not happen to you it does not mean that the chemotherapy is not working. Hair may begin to regrow during chemotherapy. This doesn't mean that the chemotherapy has stopped working against cancer.

Hair loss from chemotherapy is reversible. Your hair will begin to regrow within about a month after stopping your treatment and should be fully back after 3-4 months. At first, hair may come back darker and or curlier than your usual hair. It will eventually regain the characteristics of the hair you had before chemotherapy.

If you know that hair loss will be likely from your treatment, you may find a few of the following tips helpful.

1. Shop for a wig or head cover before the hair loss happens. You can also better match your normal hair color.
2. Hats, scarves, turbans, and caps are frequently used as head covers during the time of hair loss.
3. Cut your hair short or shave it off just before it comes out to avoid the mess of rapid hair loss.

Tips for hair and scalp care during chemotherapy

- Use a mild or gentle shampoo.
- Apply gentle moisturizing creams.
- Gently comb or brush hair.
- Use a soft bristled brush.
- Use the lowest heat possible on your blow dryer.
- Do not dye your hair or get a perm during treatment.

HOW CHEMOTHERAPY IS GIVEN

Most chemotherapy medicines are given by injections into a vein, intravenous (IV). Some are taken by mouth. A few are given by injections under the skin or into a muscle.

For IV chemotherapy, a small needle is inserted into a vein and the medication is given. The length of time for the infusion depends on the chemotherapy program your oncologist has chosen for you. A person's type of cancer determines the kind of treatment given.

Some infusions take minutes; others take several hours. You may also be receiving anti-nausea and other medicines through this IV line to prevent side effects. At the end of the treatment, the needle is taken out. Other than the discomfort of the needle being inserted, chemotherapy should not be a painful experience.

A portable infusion pump may also administer chemotherapy. The pumps are generally small and can be worn on a belt, in a pocket or in a fanny pack. They are very helpful when chemotherapy must be given continuously over a specified period, usually several days. The pump allows you to stay at home instead of being in the hospital for your chemotherapy.

VENOUS ACCESS DEVICES

Sometimes it is necessary to place an indwelling catheter for your chemotherapy. This is a tube that is surgically placed into your vein. This will stay in place for many weeks or even months to years. There are many different kinds of these catheters. Please talk to your doctor or oncology nurse about this.

These devices allow chemotherapy and other intravenous medications to be given without using a vein in the hand or arm. They often permit blood to be drawn more easily as well. The devices are usually removed when therapy is completed. If it is determined that you would benefit from such a device, a referral will be set to the appropriate department for placement.

Venous Access Devices

- PORT-A-CATH: Requires flushing every 4 weeks when not in use.
- PICC LINES: Requires flushing and dressing changed every 7 days without exception.

OTHER CONSIDERATIONS

Consult your oncology doctor or pharmacist before taking any other medications, including vitamins and herbal remedies.

REDNESS OR BRUISING

If redness or pain occurs at the chemotherapy injection site, call the doctor or nurse. Slight bruising at the site where blood was drawn or where treatment was given may occur and is usually harmless.

DENTAL HEALTH

Consult with your doctor or nurse before having any dental work or other surgical procedures done during the course of treatment. Refer to the section on mouth sores for more information on dental hygiene.

ROUTINE MEDICAL CARE

Your Primary Care Physician (PCP) will continue to take care of your routine medical needs. When seeking medical attention or advice from your PCP, remember to inform them of the care you are receiving in the Hematology/Oncology department.

SUN SENSITIVITY

Certain chemotherapy medications may cause your skin to be more sensitive to the sun. Your skin may become more likely to burn outdoors or with use of tanning beds. We recommend routine use of a sunscreen (SPF 30 or more) as well as keeping your head covered with a hat, turban, or hairpiece while outdoors. If you have questions as to the best practice for you, please check with your oncology doctor, nurse, or pharmacist.

INTIMACY AND SEXUALITY

Our sexual lives are an important part of who we are, and it is common to have concerns about chemotherapy's impact on sexual desire, fertility, and safety. It is important for you and your partner to be able to continue a sexual relationship and talking to one another about your needs and body changes is a key component to maintaining intimacy.

Chemotherapy can cause disturbances such as menstrual irregularities, decreased libido, impotence, and infertility (both male and female). Women may experience vaginal dryness. It is suggested that you refrain from unprotected intercourse for at least one year after completing chemotherapy treatments because pregnancy is not advisable. Please consult with your oncologist about sperm or egg banking prior to starting chemotherapy. Please feel free to discuss your concerns with your physician, nurse, or with a healthcare professional.

NUTRITION

Chemotherapy can affect eating in many ways. There may be nausea and vomiting, loss of appetite, diarrhea or constipation, mouth sores, weight loss (and sometimes weight gain), changes in how food tastes and smells and maybe an inability to eat more than just a few bites. These symptoms can be very stressful for you and the people who support you. A dietitian can help you explore what to eat when you don't feel like eating.

We want to help you maintain your strength and weight during treatment. Nutrition recommendations during chemotherapy can be very different than those for the general population. Contact the dietitian, especially if you have severe or ongoing trouble with eating or weight loss.

General hints about eating well during chemotherapy

- Eat food and beverages in a relaxing and comfortable environment.
- Take advantage of the times you feel well to eat.
- Keep the pantry stocked with easy to prepare meals and quick snacks.
- Eat small frequent meals and snacks (eat 5-8 times daily).
- Exercise lightly or take a short walk before mealtimes.
- It may be easier for you to drink some of your calories and protein rather than eating them. Nutrition shakes can replace snacks or small meals. (Some brand names include: NuBasics™, Ensure™Boost™, or Carnation Instant Breakfast™).
- If pain or nausea is a problem for you, be sure you have taken your pain or anti-nausea medication before mealtime so that you are comfortable when you are ready to eat.

Consult your oncology doctor or pharmacist before taking any other medications, including vitamins and herbal remedies.

COMPLETE CARE

While your focus will be on your physical health and all your test and treatments, it is important not to forget about your emotional, psychological and spiritual health. They can affect your physical health and play an important part in your recovery.

Kaiser Complete Care Services

Along with medical treatment, there are other ways in which Kaiser Permanente and the community can lend assistance.

- **Social Work:** Medical social workers are available to assist you when you or a loved one is faced with a serious illness. MSWs offer education, information services, support, and strategies for coping. Often, a diagnosis of cancer can create other needs such as financial, transportation, advance directives, and end of life planning. Social workers can assist or direct you to other appropriate resources within Kaiser Permanente or the community. If you would like to speak with a social worker, please feel free to contact the Oncology Social Worker with any questions or concerns.
- **Counseling:** Santa Rosa Oncology Department understands the many facets of complete cancer care. Along with state-of-the-art medical treatment, Kaiser Permanente aids in addressing social, emotional, and behavioral concerns through Behavioral Medicine Services.

Emotional Support

- Have family members or friends help you get your house ready before you have treatment. There are a lot of small adjustments that can make your life easier, such as:
 - Having a small step stool available to eliminate the need to reach high.
 - Using a hand-held shower hose when bathing.
 - Stocking up on supplies that you may need (thermometer, toiletries, food to settle your stomach, etc).
- Prepare a phone list of “helpers”. It can include family, friends, and neighbors or volunteers from the American Cancer Society.
- Try to find someone you can reach out and open to. It should be someone you feel safe sharing your thoughts, fears, anger, and hopes. Support groups also offer a safe place to share your thoughts and emotions. Be sure to consult with your care team for recommendations.
- Find inspiration and hope in the things that bring you joy (i.e. reading, music, family, pets, etc).

Family Support

- **Family and Partner/Spouse Issues:** Every person has a different way of handling news that a loved one has cancer. Many people react with shock, disbelief, and even anger when they first receive the news. Keep in mind that there is no “right way” for you or your family to feel about your

diagnosis. Sharing and being open with one another is one of the best ways for families to deal with their feelings.

- **Telling your children:** Many parents don't want to burden their children with worries and fears about their illness. They keep the truth from their children in hopes of sparing them some pain. But even the youngest of children can sense when something is wrong. Many parents choose to tell their children only what they feel their children really need to know. How much you tell depends on a child's age and maturity, as well as how much you feel your child can handle. Be prepared to offer your children a lot of reassurance.
- **Help from Family Members:** Asking your family members for help during this time benefits you and them.
 - Assign specific tasks to each family member. Don't hesitate to ask for help with everyday tasks like cooking, cleaning, yard work, and driving children to school and activities.
 - You might ask several people to provide different kinds of emotional support so that you always have someone to call on.

Legal Support

When you've been diagnosed with cancer, you want to concentrate on getting better and coping with your treatment. It's also a good idea to make some important decisions with your family and doctor while you are still feeling well. Kaiser Permanente encourages every member over the age of 18 to complete an Advance Health Care Directive (AHCD). Call (707) 393-4482 to get started.

Things you may want to discuss include:

- **An Advance Directive.** This legal document contains written instructions specifying the type of medical actions that should be taken in the event you become unable to speak for yourself.
- **A Durable Power of Attorney for Health Care.** This legal document authorizes another person to make healthcare decisions for you if you became physical or mentally unable to make these decisions yourself.

Suggestions for You and Your Loved Ones

- Maintain a healthy balance between optimism and reality.
- Develop trust in the skills of your care team members.
- Learn from the stories of other cancer survivors. Both you and your loved ones are encouraged to participate in support groups.
- Find creative ways to bring pleasure to each day.
- Share a sense of hope with one another.
- Appreciate the beauty and wonder present in life each day.

YOUR QUESTIONS

It helps to write your questions down instead of trying to remember them. Use this page to write your questions and concerns you want to discuss with your team.

GLOSSARY

Absolute Neutrophil Count (ANC): the total number of white cells that are mature enough to fight infection.

Alopecia: medical term used to describe hair loss.

Anemia: low red blood cell count causing weakness and fatigue.

Antiemetics: term used to describe medication used to treat nausea and vomiting.

Bone Marrow: is found at the center of bones, especially the skull, sternum, ribs, backbone, and pelvis. Bone marrow produces red and white blood cells and platelets.

Complete Blood Count (CBC): a blood test that will show your levels of white blood cells, red blood cells, and platelets.

Constipation: infrequent bowel movements. It may also refer to a decrease in the volume or weight of stool or the need to strain to have a movement.

Diarrhea: liquid or watery stools.

Fatigue: an unusual and persistent feeling of or sense of tiredness.

Hemoglobin: a component of your red blood cells that carry the oxygen.

Intravenous (IV): referring to a way medicines are administered into the body using veins.

Nadir: the point when the blood cells in the body are at their lowest number.

Nausea: an upset stomach which may lead to vomiting.

Neutropenia: decrease in white blood cells.

Petechiae: small, red pinpoint spots, often in clusters found inside the mouth or elsewhere on the body, such as the arms and legs.

Platelets (PLT): are the blood cells which assist in the clotting of blood to stop the bleeding from an injury.

Red Blood Cells (RBC): a type of blood cell that carries the oxygen your body needs.

Stomatitis: sores in your mouth (gums, tongue, lips) caused by chemotherapy. These can also occur in your esophagus and intestine.

Thrombocytopenia: a low platelet count.

White Blood Cells (WBC): the cells in your blood that help your body fight infection.

After Chemotherapy

A blood test should be done before each cycle of chemotherapy. Blood tests are strongly encouraged to be completed the day prior to your chemotherapy appointment.

You may be given the following medications to take at home following chemotherapy:

Compazine: _____

Decadron: _____

Zofran: _____

Emend: _____

Zarxio: _____

Please notify the Chemotherapy Nurses, Oncology Pharmacy, or your Oncology doctor if you experience any of the following symptoms:

- Temperature 100.5°F or above, or if you have shaking chills
- Any unusual bruising or bleeding
- Nausea and/or vomiting that is not controlled with medication
- Diarrhea that is not controlled with medication
- Pain that is not controlled by medication
- Constipation
- Severe fatigue or shortness of breath
- Any discomfort or sores in your mouth
- Any condition that causes concern or discomfort

CHEMOTHERAPY DEPARTMENT

Monday – Saturday: 8:30 a.m. – 5:00 p.m.

Phone 707-393-4634

ONCOLOGY PHARMACY

Monday – Friday: 8:30 a.m. – 5:00 p.m.

Saturday: 8:30 a.m. – 4:00 p.m.

Phone: 707-393-3003

KAISER ADVICE NURSE

After hours and weekends

Phone: 707-393-4044

You may notice that your nurse wears protective equipment (gloves, gown, etc.) when administering your chemotherapy to protect her or himself from being exposed to the medications. You, your caregivers, and family members must also protect yourselves against exposure. This handout will review how to safely handle chemotherapy medicines and your body waste when at home.

Handling Body Waste

Chemotherapy medication is released from the body through urine, stool, vomit, and blood for 48 hours after your treatment has stopped. The guidelines listed below should be followed during that time:

- After using the toilet, close the lid and flush twice. Men should urinate sitting down to avoid splashing.
- After using the toilet, wash your hands well with soap and water. If any fluids splashed on your skin, clean the area with soap and water.
- Wear gloves when cleaning the toilet or cleaning up any urine, stool, or vomit or changing diapers/incontinence pads. Wash your hands with the gloves on, then remove the gloves, dispose of them in the trash, and wash your hands again.
- If using a bedpan or urinal, wear gloves and dump contents into the toilet close to the water to limit splashing. While wearing the gloves, wash the container with soap and water after each use.
- Diapers can be disposed of in the regular trash.
- If you have an ostomy, wear gloves when emptying and wash the collection bag once a day with soap and water.

Handling Trash or Laundry

When handling trash or laundry that has come in contact with chemotherapy or body fluids within 48 hours after treatment:

- Wear gloves to handle contaminated trash or laundry. Wash your hands before and after removing the gloves.
- Contaminated trash can be placed in special bags if you were supplied with these or doubled bagged in a plastic, leak-proof bags.
- If possible, wash contaminated laundry right away. If you cannot wash it right away, place in a leak-proof plastic bag and wash as soon as possible.
- Wash contaminated laundry separate from a n other laundry, using regular laundry detergent and warm or hot water.

Handling Spills

If chemotherapy or body fluids (within 48 hours after treatment) are spilled or splashed:

- Wear gloves to clean up the spill/splash.
- Wipe up the spill with paper towels.
- Clean the area with soap and water and rinse using paper towels.
- Dispose of trash in specially marked containers (if you were provided with them) or double bag in leak-proof plastic bags.
- Wash hands before and after removing gloves.

Sexual Contact

Chemotherapy medications can also be excreted in body fluids, such as semen and vaginal fluid. To prevent exposure of these fluids for you or your partner:

- Use condoms during oral sex and intercourse for 48 hours after treatment.
- Effective birth control should be used throughout treatment to prevent pregnancy while on these medications and for several months or years after therapy. Chemotherapy can have harmful side effects to the fetus, especially in the first trimester. In addition, menstrual cycles can become irregular during and after treatment, so you may not know if you are at a time in your cycle when you could become pregnant or if you are pregnant.

Safety for My Family

- Hugging and kissing are safe for you and your partner and family members.
- You can visit, sit with, hug, and kiss the children in your life.
- You can be around pregnant women, though (if possible) they should not clean up any of your body fluids after you have treatment.
- You can share a bathroom with others. If body fluids splash on the toilet, wear gloves and clean the area with soap and water before others use the toilet.

Living With Cancer

If protecting your fertility is important to you because you hope to have children in the future, you need to plan. Just one cancer treatment can affect your ability to have children. So, talk to your oncologist right away to get information and start the process. Here are steps that may guide you.

Talk To Your Oncologist About The Risk Of Infertility

When you meet with your doctor, it may be helpful to ask these questions:

- Is my cancer likely to cause infertility?
- Are my treatments likely to cause infertility?
- Are there other treatments that would be effective for me but that have a lower risk of infertility?
- Can you refer me to an infertility doctor?

Find A Doctor With Experience Treating Infertility In People With Cancer

To find a specialist or to learn more about cancer and infertility, your care team can provide you with information about infertility in people with cancer and with the names of infertility physicians.

Talk To The Infertility Doctor About Your Options For Protecting Your Fertility

Here are some questions that may be helpful for you to ask the specialist:

- What reproductive options are available and safe for me?
- What are the infertility doctor's success rates for these options?
- Will these options require a delay in my cancer treatment? If so, how long?
- How much will these options cost?

For more information about sperm and egg preservation, please speak to your oncologist.

Sexuality is an important part of who we are. Feelings about sexuality affect our relationships with others, our self-image, and our zeal for living.

Cancer diagnosis and treatment may affect your ability to experience the intimacy you desire. As sexuality and intimacy are very personal parts of our human existence, it can be awkward for patients, partners, and health care providers to discuss it.

Even though it may be awkward, if you are not satisfied with your desire or ability for sex or intimacy, we encourage you to discuss these issues with your oncologist, nurse, or social worker. There are medications, treatments, and support for you. In addition, we have some literature available that may be helpful such as the American Cancer Society's booklets on sexuality and cancer. We will be happy to provide you with the literature we have on hand as well as a list of recommended web resources.

For 2-3 days following chemotherapy, there will be some trace elements of the drug in semen and vaginal fluids. You should use a condom to prevent irritation and avoid oral sex for 2-3 days following chemotherapy. Additionally, if you are sexually active while receiving chemotherapy, it will be important to prevent pregnancy.

Effects of Cancer Treatment on Sexuality and Desire

- Change in desire
- Change in body image due to surgery and/or hair loss
- Hormonal changes that may result in mood swings, hot flashes, insomnia
- Emotional distress related to the diagnosis and treatment
- Fatigue
- Vaginal dryness
- Difficulty with erection
- Difficulty achieving orgasm
- Pain

If you need to discuss sexuality or intimacy issues, your cancer care team – your doctor, nurse, and social worker – is more than willing to work with you to help resolve your issues.

Glutamine is an amino acid that appears to be used by oral and nerve tissues, and when taken in large doses seems to speed healing. We recommend its use to reduce the severity of mouth sores, and to help reduce the symptoms and time to heal for peripheral neuropathy caused by some chemotherapy drugs (Taxol, Vincristine, Oxaliplatin).

This is not something to take to prevent side effects, but more to treat the effect when it occurs. In the case of mouth sores, it would be best to start taking the Glutamine after the first sign of mouth sores and to continue until the sores resolve. Restarting the Glutamine at the next chemotherapy treatment would be prudent.

DOSE: The dose is 15 grams 2 times daily, suspended in water or juice. It does not have a taste, but it does have a texture: it's gritty. Taking Glutamine less frequently will probably reduce its effectiveness.

Where Do I Get It?

1) Vitamin Adventure, 2350 Santa Rosa Ave, Suite D (707-570-0145)

Located in the same building as Comcast, is the least expensive in Sonoma County. Across Kawana Springs Road from the Costco shopping center.

2) www.vitacost.com and www.amazon.com are two online sources that may be more economical.

Who Should Not Take Glutamine

- Advanced liver disease or cirrhosis
- Advanced kidney disease on a protein-restricted diet
- Prone to seizures
- Bipolar disorder
- Sensitivity to MSG

Many things can contribute to constipation. Narcotic pain relief, inactivity, a low fiber diet and poor fluid intake can all be included. Narcotic pain relievers and some chemotherapy drugs affect the nerves that stimulate the intestines and slow the passage of food, causing constipation. Therefore, if you are prescribed narcotic pain relievers or are treated with chemo drugs that slow intestinal movement, it is very important to also prevent constipation by the following regimen:

- 1 stool softener – Colace/Docusate Sodium (250 mg) – morning and evening AND 1 Senokot or Senna (Laxative) morning and evening.
- If no results after two days, 2 Senokots morning and evening (it is safe to continue increasing the Senokot until the constipation is relieved).

If the stool becomes too loose: decrease the number of Senokot but continue the stool softeners as directed here.

If bowel movements are regular but stools are hard: increase the number of stool softeners to two times per day.

- Increase fluids whenever possible. Fruit juices and nectars can also contain fiber, which helps the stool absorb water.
 - Remember – caffeine causes fluid loss, so please limit caffeinated drinks.
 - Cheese, bananas, and ice cream tend to worsen constipation.
- Whenever possible, increase exercise. This helps the digestive process and helps prevent fatigue. Consider a walk around the block or yard 3-4 times per week – whatever you can do will help!

For Chemotherapy-related diarrhea, please consider the following Imodium-AD regimen:

- 2 tablets at the first onset of diarrhea
- 1 tablet every 2 hours until you are diarrhea free for 12 hours
- During the night, take 2 tablets every 4 hours

If these measures are not effective, or if you have any questions or concerns, please call:

Chemotherapy Pharmacist – 707-393-2079

Chemotherapy Nurse – 707-393-4634 (press “1” for a Nurse)

For after-hours and/or weekends and holidays, please call:

Medicine Advice Center – 707-393-4044

To help you prepare for chemotherapy, here is a shopping list of groceries and other items you are likely to need. Buying these items ahead of time will save you time and energy later when you may be busy with medical appointments and when you may be more tired.

Stock Up On Groceries

- Fluids such as apple juice, grape juice, fruit nectar, soup, broth, sports drinks, ginger ale, watermelon, Jell-O, popsicles, sherbet, and herbal teas.
- Bland foods such as rice, potatoes, pasta, oatmeal, cereal, bread, crackers, cottage cheese, yogurt, skinless chicken, fish, eggs, sliced turkey, applesauce, and bananas.
- High protein snacks such as cheese, yogurt, nuts, and peanut butter.

Other Items You Are Likely To Need

- Thermometer – any type will do.
- Soft or children's toothbrush – for gentle mouth care.
- Baking soda – to make a mild mouthwash.
- Lip balm with sunscreen – to protect and moisturize your lips.
- Sunscreen (SPF 30 or greater) – to protect your skin, which may be more sensitive to the sun during chemo.
- Hand sanitizers – an easy way to keep your hands clean.
- Tylenol or other mild pain medication – for a headache or fever which can occur during treatment.
- Docusate Sodium (DSS) – a stool softener because some medications you receive can cause constipation.
- Senna – a mild, natural laxative because constipation can occur as a side effect of some medications you receive.
- Milk of magnesia – another laxative that you may need.

Other Items You May Need

- Hat, scarf, or wig – if you will lose your hair.
- Condoms – to protect your partner if you are sexually active and to prevent pregnancy during chemo.
- Benadryl (Diphenhydramine) – if your doctor or nurse recommends it.
- Imodium – for diarrhea if this is a possible side effect of your chemo.

Nutrition



Nutrition Counseling is Available for You

Meet with your Registered Dietitian

Nutrition is an important part of your health care journey and can:

- help minimize side effects of treatments
- prevent unwanted weight loss
- improve overall well-being
- clear up any confusion regarding nutrition claims

When you are ready, ask your health care provider for a referral to meet with the dietitian.

*office visit cost share applies

You may also visit our Cancer and Nutrition web page at
kp.org/santarosa/nutritionandcancer

***Kaiser
Permanente
Santa Rosa
Classes***

Program	Description	Registration
<i>Emotional Wellness</i>		
Pathways to Emotional Wellness	A great starting point. Learn how your thoughts and emotions can affect your physical wellness. We'll help you identify your sources of stress and learn simple techniques to help you relax, deal with anxiety, and recognize the signs and symptoms of depression. Members only.	This is a covered benefit for members 707-393-4167
Mind-Body Health	Emotions, thoughts, and behaviors can affect your health. In this series, you'll learn to recognize the sources of stress in your life and how to manage stress-related symptoms and illnesses. You'll also learn ways to relax and develop healthy lifestyle habits to take better care of yourself and enjoy life more.	This is a covered benefit for members; \$75 nonmembers 707-393-4167
Mindfulness-Based Stress Reduction	A healthy mind and spirit are powerful healing tools for the body. Come learn practices in mindfulness meditation and gentle movement that can help you manage stress, chronic pain, illness, anxiety, and depression.	\$90 members \$130 nonmembers 707-393-4167
Understanding Anxiety	Learn to identify what triggers anxiety for you as well as ways to manage your symptoms. We'll help you explore your thoughts and compare your fears with reality. You'll also learn techniques to relax, reduce your response to triggers, and think and act assertively.	This is a covered benefit for members 707-393-4167
Managing Depression	Depression is common, real, and treatable. This series explores the causes and effects of depression. You'll learn how to challenge negative thinking, reduce stress, and manage moods long after the class is over.	This is a covered benefit for members 707-393-4167
Acupressure	Learn about acupressure points, practice techniques of self-massage, and develop self-care exercises that can help promote healing. (Petaluma Medical Center)	\$35 members \$50 nonmembers 707-765-3485

Program	Description	Registration
<i>Healthy Eating</i>		
Food is Medicine: Nutrition's Role in Fighting Cancer	Learn about cancer prevention and reducing your risk of cancer recurrence through diet and lifestyle changes. Not recommended for members currently in treatment for cancer or beginning treatment within the next month (ask your doctor for a registered dietitian referral instead).	No class fee 707-393-4167
<i>Flexibility and Movement</i>		
Restorative Yoga	Quiet your body and mind with gentle poses and breathing exercises. You'll use props to help you support your body in positions that promote relaxation and prevent strain. Poses are safe yet effective for beginners, older adults, and people with ongoing pain or illness. Participants must be physically capable of getting up and down from the floor without assistance.	\$45 members \$55 nonmembers 707-393-4167
Tai Chi for Health & Wellness	Enhance your overall health and well-being with the gentle yet powerful practices of tai chi and qi gong. In this program, you'll learn a series of soft, graceful movements that can help reduce stress and pain, promote circulation and flexibility, and improve your strength and balance. Massage, acupressure, breathing, focused attention, visualization, and meditation practices are also included in this class. People of all ages and fitness levels are welcome to participate (chairs are available if your ability to stand is limited).	\$45 members \$55 nonmembers 707-393-4167

Program	Description	Registration
<i>Online Resources</i>		
Nutrition and Cancer	Access online resources and information about nutrition during cancer care.	No fee
Overcoming Depression	This customized online program can help you gain greater control over your depression – and work toward feeling better.	
Overcoming Insomnia	Gain greater control over your insomnia and get more of the sleep you need with this online program that's customized for you.	
Listen	Guided imagery programs to help you reduce stress.	
Relax	This online program delivers a customized plan to manage symptoms and health issues related to stress.	
		Kp.org/ santarosa/ cancer
		Kp.org/ overcomingdepression
		Kp.org/ overcominginsomnia
		Kp.org/listen
		Kp.org/relax

***Kaiser
Permanente
Santa Rosa
Emotional Support
Resources***



We invite you to meet with other people who have been diagnosed with or are in treatment for cancer. This is a safe place to share experiences, feelings, get your questions answered, and discover that **YOU ARE NOT ALONE.**

Cancer Support Group (for newly diagnosed and early stage patients)

Facilitator: Oncology Social Worker

When: 2nd and 4th Tuesdays, 1:00 PM - 2:30 PM

Where: 3333 Mendocino Avenue, Suite 105

Contact: (707) 393-3749 for more information

This group is for Kaiser Permanente patients receiving treatment for cancer. Sessions are free and open to Kaiser Permanente members with any cancer diagnosis, as well as their caregivers. This group provides education and support.

**Please call to confirm prior to attending your first group.*

Cancer Support Group (for later stage patients)

Facilitator: Licensed Clinical Social Worker

When: Mondays, 10:30 AM – 12:00 PM

Where: 401 Bicentennial Way

Contact: (707) 393-2454 for more information

This group is for Kaiser Permanente patients receiving treatment for cancer. Sessions are free and open to Kaiser Permanente members with any cancer diagnosis, as well as their caregivers. This group provides education and support.

**Please call to confirm prior to attending your first group*

Behavioral Medicine Services

Short-term behavioral-focused counseling for mild to moderate anxiety and depression, insomnia, stress and grief.

Self-referral at **707-571-3755**. Ask specifically for “Behavioral Medicine Services”.

Services are provided in Adult and Family Medicine Outpatient Offices at:

- *401 Bicentennial Way in Santa Rosa*
- *2240 Mercury Way in Santa Rosa*
- *5900 State Farm Drive in Rohnert Park*

Mental Health and Wellness

Counseling for moderate to severe anxiety and depression

Medication evaluations

Self-referral at **707-571-3778** or talk to your Primary Care Physician (PCP)

Health Education

Website: kp.org/santarosa/classes

Information: 707-393-4167

Classes held: 3333 Mendocino Avenue, Suite 105 in Santa Rosa

Healthy Living Classes

Managing Your Stress (6 sessions)

Understanding Anxiety (6 sessions)

Pathways to Emotional Wellness (1 session)

Mindfulness Based Stress Reduction (9 sessions)

Online Tools

Kp.org/healthylifestyle - for depression, insomnia, chronic pain

Kpdoc.org/podcasts - Health Journeys Guided Imagery

***Kaiser
Permanente
Santa Rosa
Supportive Care
Services***

Supportive Care Services

Palliative Care Clinic



Supportive Care Services Clinic

Specialty Palliative Care & Life Care Planning

707-393-4482

Carla Fracchia, Physician

Grace Wu, Physician

Yve Duran and Brian Griffiths, Social Workers

Kari Logsdon, Program Assistant

Darcy Walsh, Manager

The goal of our Supportive Care Services team at Kaiser Permanente Santa Rosa is to help you live as well and fully as possible.

Specialty Palliative Care Clinic

Palliative care is specialized medical care for people with a serious illness. This type of care is focused on providing relief from your symptoms and easing any stress that may occur. Our palliative care team works with all of your current doctors to provide an **extra layer of support** to you and your loved ones. Palliative care is appropriate at any stage of a serious illness and can be provided along with both curative and comfort-focused treatment.

We can help with:

- Pain and symptom management
- Facilitating family discussions regarding healthcare decisions
- Supporting you and your family through challenging issues
- Planning for the future and ensuring that you have a voice in your medical care
- Addressing social factors that affect your health such as family issues, finances, caregiving needs and living situation

Life Care Planning

At Kaiser Permanente, we feel that life care planning is an **essential part of healthcare** for all adults. Life Care Planning is about doing what you can to ensure the future health care treatments you receive are consistent with your wishes and preferences. Our Life Care Planning department has expert facilitators to help you and your family explore, discuss, and formally document your wishes in an Advance Health Care Directive and/or other appropriate documents.

Please talk with your doctor or contact us at directly at 707-393-4482 if you feel our services would benefit you.



Advance Health Care Directive

KAISER SANTA ROSA • ONCOLOGY DEPARTMENT

What is an Advance Health Care Directive (AHCD)?

An AHCD is a legal document that allows you to choose a person you trust to speak with your healthcare providers on your behalf if you cannot speak for yourself.

The AHCD can also specify your preferences about certain types of life-sustaining treatments that you may or may not wish to receive.

What is a Durable Power of Attorney (DPOA)?

This is the person, noted in a legal document, that you have chosen to act in your place.

Why is it important to document my wishes?

A DPOA for Health Care will express your wishes to your providers and make decisions about your care if you are unable to make decisions for yourself.

The AHCD can help guide your loved ones to make decisions on your behalf in a difficult time.

Where can I find help with life care planning?

Kaiser Santa Rosa offers these resources to ensure your wishes are documented and honored:

A monthly class with experienced staff to guide you in completing the AHCD

- ☒ To sign up for this class, call our Health Education department at **(707) 393-4167**

A complimentary notary to finalize the legal document

- ☒ For general questions or to take advantage of our notary service, call the Life Care Planning department at **(707) 393-4482**

An Oncology Social Worker to consult for direct assistance

- ☒ To reach the social worker, call **(707) 393-3749**

Community Resources

Program	Description	Contact Info
<i>Disability Benefits</i>		
Disability Benefits 101 - California	Tools and information on employment, health coverage, and benefits. https://ca.db101.org/	None
State Disability Insurance	Information about California State Disability Insurance (SDI) short-term Disability Insurance (DI) and Paid Family Leave benefits. https://www.edd.ca.gov/disability/	
Social Security Administration	Information about federal disability benefits and online forms. https://www.ssa.gov/benefits/disability/	1-800-772-1213
California Department of Motor Vehicles	Information for disabled person parking placard or license plates. https://www.dmv.ca.gov/portal/dmv/detail/vr/disabled	1-800-777-0133
Medi-Cal	California's Medicaid program https://www.dhcs.ca.gov/	
<i>Transportation</i>		
Road to Recovery (American Cancer Society)	ACS volunteer program provides transportation to and from treatment, for people with cancer who do not have a ride or are unable to drive themselves. https://www.cancer.org/treatment/support-programs-and-services/road-to-recovery.html	1-800-227-2345
Volunteer Wheels (Sonoma County)	Provides seniors and people with disabilities with transportation. Operates the ADA paratransit service for Sonoma County Transit. http://sctransit.com/paratransit/	1-800-992-1006 1-707-573-3377

Program	Description	Contact Info
<i>Nutrition</i>		
Ceres Community Project	Supporting individuals dealing with serious illness with free and low-cost, delivered meals, nutrition education, and a community of caring. https://www.ceresproject.org/#	707-829-5833
Mom's Meal	National provider of refrigerated, home-delivered meals and nutrition services for individuals managing a chronic disease or desiring convenience. https://my.momsmeals.com/members/order.aspx	1-877-508-6667
Meals on Wheels (Council on Aging)	Nutrition-rich meals delivered to seniors. http://councilonaging.com/meals-on-wheels/	1-707-525-0143
<i>Exercise</i>		
Airport Club Cancer Wellness Program	Exercise program for people recovering from cancer. https://www.airportclub.com/cancer-wellness-program	Lori Ennis 1-707-521-2443
Park Point Club Community Wellness	Exercise program for cancer patients at any stage from diagnosis through recovery. http://www.parkpointhealthclub.com/santa-rosa/cancer-wellness-program-sr/	Krista Williams 1-707-578-1640 X 125
<i>Community and Online Support</i>		
North Bay Cancer Alliance	Independent community resource providing local cancer resources and information as well as financial support for cancer patients who cannot pay. https://northbaycancer.org/	
Nancy's List	A grass roots list of local and internet resources as well as valuable information for navigating through diagnosis, treatment and survivorship. https://nancyslist.org/	Nancy Novak, Ph.D. 1-215-596-9591

Program	Description	Contact Info
<i>Community and Online Support (cont'd)</i>		
Stupid Cancer	Empowerment for the young adult cancer community. https://stupidcancer.org/	
<i>Websites to Help Communicate with Family and Friends</i>		
Caring Bridge	A free site where you can share news and receive support. https://www.caringbridge.org/	
Lotsa Helping Hands	A free site that facilitates organization of support for caregivers. https://lotsahelpinghands.com/	
Gofundme	Formerly known as YouCaring, this is a free crowdfunding site for cancer patients. https://www.youcaring.com/	

Financial Resources

Financial Resources

Kaiser Assistance

KP MFA/Medical Financial Assistance Program

**must have a low income*

First Floor of the Hospital, across from elevators

Hours: Mon-Fri, 9:00-1:00 pm, 3-4:40 pm

707-393-4458

General Assistance: fund finders

Cancer Financial Assistance Coalition

www.cancerfac.org

www.cancercare.org/helpinghand

CancerCare

cancercare.org/publications/62-sources_of_financial_assistance

1-800-813-4673

Assistance is limited to women, or men with breast or pancreatic cancer

Copay Assistance

CancerCare Copayment Assistant Foundation

cancercare.org/copayfoundation

Patient Advocate Foundation's Copay Relief Program

copays.org

PAN Foundation's Patient Program

panfoundation.org/index.php/en/patients

Co-pays, deductibles, health insurance premiums, travel expenses

Prescription Assistance

Needymeds.org

Helpful search engine, search by medication

Partnership for Prescription Assistance

pparx.org

RxAssist Patient Assistant Program Center

rxassist.org

Government Assistance

Medi-Cal

Health insurance for individuals who make less than \$1,396 per month and have less than \$2,000 in assets. Once you receive Medi-Cal, you are eligible for In-Home Supportive Services.

520 Mendocino Av. Santa Rosa

707-565-2715

877-699-6868

CalFresh (formerly known as food stamps)

www.getcalfresh.org (apply online)

707-565-2715

877-699-6868

PG&E Low-Income or Medical Baseline Allowance discount

www.pge.com

800-743-5000

(Or ask Oncology Social Worker for application)

Specific Cancers

Leukemia & Lymphoma Society

lls.org/support/financial-support

grants, copay assistance and travel assistance

Survivorship Resources

cancerfinances.org

cancercare.org/tagged/post-treatment_survivorship

Disability Resources & Forms

Information about Disability Benefits, Medi-Cal, FMLA and Financial Assistance Programs

Three government Disability Insurance programs have very similar names: SDI, SSDI, and SSI.

State Disability Insurance (SDI) is a state program that gives a cash benefit for one year or less to Californians who are disabled due to significant illness who worked before becoming disabled. SDI generally pays 55% of your wages for up to 52 weeks of disability.

Social Security Disability Insurance (SSDI) is a federal program that pays monthly cash benefits to people with long-term disabilities (due to significant illness) who qualify because they used to work or have qualifying family members who worked and paid Social Security taxes for a long enough time.

Supplemental Security Income (SSI) is a federal program that gives a monthly cash payment to people older than 18 but younger than 65, who are disabled and are not able to work. If you cannot work due to a significant illness, have no other sources of income, and have limited resources, you may be eligible for SSI. You do not need to have worked in the past to get SSI. In California, people who qualify for SSI also get Medi-CAL benefits automatically.

You may be able to qualify for more than one of these programs at the same time. For example, you might get SDI at first and later start getting SSDI. If you get SSDI and have low resources, you may qualify for SSI as well. Make sure you know which benefits you get and which you might qualify for if you applied.

Private Disability Insurance

Short-Term Disability (STD) is private insurance that replaces some of your income in an illness prevents you from working. While you are away from work it pays you a certain percentage of your income for a set period. Some employers provide group STD policies as part of their benefits packages. An STD policy can be purchased individually.

Long-Term Disability (LTD) insurance is private insurance that helps people who cannot work because of a disability. If you have LTD insurance, it will replace some of the income you lose when you can't work because of a disability or severe illness. Some people have LTD insurance from their employers. Others purchase it individually.

Economic Assistance

Medi-Cal is California's Medicaid program. This is a public health insurance program which provides needed health care services for low-income individuals and families, seniors, and persons with disabilities, including low-income people with specific diseases.

In-Home Supportive Services (IHSS) provides caregiving services to low-income seniors and people of any age who are disabled (due to significant illness) who need assistance to safely remain at home. You must be receiving Medi-CAL or SSI to be eligible for IHSS.

Long-Term Care Medi-CAL (LTC) is a state program that provides for custodial and skilled nursing care to low-income individuals and to nursing home residents who have used up their personal resources.

FMLA/PFL

Family and Medical Leave Act (FMLA) provides certain employees with up to 12 weeks of unpaid, job-protected leave per year. It also requires that their group health benefits be maintained during the leave of absence. There are no cash benefits associated with FMLA.

Paid Family Leave (PFL) provides short-term cash benefits to eligible California workers who have a full or partial loss of wages due to a need to care for a seriously ill family member. PFL is a component of the SDI program to provide partial wage replacement benefits.

Financial Assistance

Kaiser Permanente Medical Financial Assistance (MFA) Program offers financial help for medical services and prescriptions to all Kaiser Permanent patients who qualify.

Additional Financial Resources and community grants are available for patients diagnosed with and undergoing cancer treatment. Please call the Oncology Social Worker for more information.

How To Apply For State Disability Insurance (SDI) Through Employment Development Department (EDD)

This is a benefit through the State of California that will pay you for up to 52 weeks, or 1 year, of disability while you undergo chemotherapy or other treatment for cancer. You can take part-time or full-time disability, depending on your oncologist's authorization.

Note: You cannot file for disability until the first day you stop working.

Step 1: Once you and your oncologist decide which date you will start treatment, including chemotherapy or surgery, request a doctor's note, i.e. a "Work Activity Status Form (WASF)" from your oncologist. Either Katrina Ouellette, Medical Assistant, at 707-393-4774 or Zoe Koehler, Oncology Social Worker at 707-393-3749 will be able to assist you. The date you start treatment will be the first date of your disability.

**It is your responsibility to keep track of the end date of your WASF and call us to request an extension if needed (Generally our oncologists write WASFs for 6 months at a time).*

Step 2: On the first day of your disability, go to <http://www.edd.ca.gov/Disability/> and select SDI Online. Choose SDI Online Registration and complete the questions. *Be sure to authorize Kaiser Permanente to disclose to EDD and not the other way around.*

Step 3: You will need the following information to file a claim:

Date your disability began	✓ Sick, vacation, paid time off, annual or 'other' pay provided by your employer (if applicable)
✓ The very last day you worked your regular or customary hours (full duty)	✓ Driver's License number
✓ For California State government employees, bargaining unit number	✓ Last or current employer name, mailing address and phone number as found on W2 or paycheck stub

Document the receipt number that displays once your claim is submitted.

Step 4: After filing your claim form, please contact Kaiser Permanente Release of Medical Information:

Provide the following information	By one of the methods below
✓ Your Medical Record Number ✓ Receipt Number ("R"+15 digit number) OR simply provide us your "Claimant's Statement" created upon online submission	<ul style="list-style-type: none"> ▪ Email: SRO.ROI@kp.org ▪ Fax: 707-571-3767 ▪ Phone: 707-571-3770 ▪ In Person: 3558 Round Barn Blvd. #112 Santa Rosa, CA 95403

****In the case you have additional questions, you can contact EDD directly at 800-480-3287 or by going to their office at 606 Healdsburg Ave. Santa Rosa, CA 95401***



Save time — manage your medical records online

On kp.org, it's easy to access your health information when you need it. Many records, forms, and certifications are available online — anytime, anywhere.

Whether you're at home or on the go, it's easy to:

- Request and view your medical records
- File a disability claim
- Request Family and Medical Leave Act certification

Get started today at kp.org/requestrecords

1. Type kp.org/requestrecords into your web browser.
2. Select an option that fits your needs:
 - A copy of your electronic medical records.
 - Request for a state disability physician/practitioner certificate.
 - Family and Medical Leave Act (FMLA) certification.
 - Immunization Records.
3. Log into your KP.org account.
4. Complete your request.

For Any questions please contact our Release of Medical Information Department at (707) 571-3770 or SRO.ROI@kp.org

Website Resources



Cancer Care

Santa Rosa Medical Center

Access online tools and resources at kp.org/mydoctor/santarosa/cancer

You're in good hands with Kaiser Permanente. We're here to give you the care and support you need as you face the challenges of cancer. Our leading experts and clinical teams treat every type of cancer, including yours. Our complete, compassionate treatment approach provides specialty care that is personalized just for you.

Online resources include:



Understanding Cancer

Learn more about your cancer and treatment options. This information will help you know what to expect and answer some of your questions.



Personalized Care

Get personalized care that includes screening and diagnostic services. Read about the various types of cancer treatments you may experience. Find out how to prepare, how treatments work, and possible side effects.



Supportive Services

Explore all of the available resources and choose what is most helpful to you and your loved ones.



Clinicians

Learn more about our expert doctors and staff. Rest assured you are in good hands at Kaiser Permanente.



Clinical Trials

The Kaiser Permanente Oncology Clinical Trials in Northern California is one of the leading clinical cancer research organizations in the United States. Talk with your doctor to learn if you qualify for a specific trial.



Survivorship

Your cancer journey will have ups and downs, and we want to support you with resources and tools for every stage.

Program	Description	Contact Info
American Cancer Society	Provides cancer information and support to patients, families, and caregivers. It also supports research, community education and advocacy on public policy issues. http://www.cancer.org	1-800-227-2345 1-707-545-6728
American Institute for Cancer Research	Cancer research for prevention and survival. Particularly focused on diet and nutrition research. http://www.aicr.org	1-800- 843-8114
Cancer and Careers	Resource for working people with cancer; expert advice, interactive tools, educational events. https://www.cancerandcareers.org	1-646-929-8032
Cancer Care	Online support, educational events, financial help and resources. https://www.cancercare.org/	1-800-813-HOPE (4673)
Cancer Hope Network	Cancer Hope Network matches patients and families with trained volunteers who have recovered from a similar cancer experience. http://www.cancerhopenetwork.org	1-877-HOPENET
Cancer.Net (ASCO)	The American Society of Clinical Oncology has a series of follow-up care guides. http://www.cancer.net/patient/survivorship OR http://www.asco.org	1-888-651-3038
Cancer Support Community	Provides support groups, stress reduction and cancer education workshops, nutrition guidance and exercise sessions. http://www.cancersupportcommunity.org	1-888-793-9355
Centers for Medicare and Medicaid Services	Information about patient rights, prescription drugs and health insurance issues. http://www.medicare.gov http://www.cms.hhs.gov	1-800-MEDICARE
ChemoCare	Provides comprehensive resources for cancer patients and their caregivers on chemotherapy drug and side effect information and cancer wellness information from the Cleveland Clinic. http://chemocare.com/	1-844-268-3901

Program	Description	Contact Info
Equal Employment Opportunity Commissions	EEOC provides fact sheets about job discrimination, protections under the Americans With Disabilities Act and employer responsibilities. http://www.eeoc.gov	1-800-669-4000
Leukemia and Lymphoma Society	Support and services for patients with blood cancers. http://LLS.org	1(855) 525-8632
LIVESTRONG	Portal to the LIVESTRONG Community and the University of Pennsylvania. http://www.livestrong.org	1(855) 220-7777
Look Good Feel Better	Look Good Feel Better is a non-medical, brand-neutral public service program that teaches beauty techniques to people to help them manage the appearance-related side effects of cancer. http://lookgoodfeelbetter.org/	1-800-395-LOOK
National Cancer Institute (NCI)	Information of cancer prevention, screening, diagnosis, treatment, genetics, and supportive care. Also lists clinical trials and specific cancer topics http://www.cancer.gov	1(800) 4-CANCER
National Cancer Institute: Office of Cancer Survivorship	Government website focused on survivorship science and care. http://www.cancercontrol.cancer.gov/ocs	1(240) 276-6690
National Coalition for Cancer Survivorship	Resource for cancer policy analysis, advocacy and quality of life issues for cancer survivors. http://www.canceradvocacy.org	1(877) 622-7937
National Comprehensive Cancer Network (NCCN)	Includes information about follow-up care for cancer. http://www.nccn.org	1(215) 690-0300

Oncolink	Provides tools and educational materials to support the needs of patients and caregivers. This was the first cancer website established on the Internet in 1994. https://www.oncolink.org/	
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Appendix

Active treatment: The period when a person is having surgery, chemotherapy, radiation therapy, or other treatment to slow, stop, or eliminate the cancer.

Americans with Disabilities Act (ADA): A federal (national) law that protects people with disabilities from discrimination. It requires employers to make reasonable accommodations in the workplace for qualified individuals with a disability. Learn more at www.ada.gov.

Anxiety: Feelings of nervousness, fear, apprehension, and worry.

Case manager: A health care professional who helps coordinate a person's medical care before, during, and after treatment. At a medical center, a case manager may provide a wide range of services, including managing treatment plans, coordinating health insurance approvals, and locating support services. Insurance companies also employ case managers.

Chemotherapy: The use of drugs to destroy cancer cells.

Clinical trial: A research study that involves volunteers. Many clinical trials test new approaches to treatment and/or prevention to find out whether they are safe, effective, and possibly better than the treatment doctors currently use.

Depression: Defined as having a low mood and/or feeling numb consistently for more than two weeks, every day and much of the day.

Fertility: Ability for women to become pregnant or have children. For men, fertility refers to the ability to provide healthy sperm.

Follow-up care plan: A personalized schedule of follow-up examinations and tests that a doctor recommends after the active treatment period. This may include regular physical examinations and/or medical tests to monitor the person's recovery for the coming months and years. This may also be called a survivorship care plan; it is often used in conjunction with a treatment summary.

Hormonal therapy: Treatment that removes or blocks hormones to destroy or slow the growth of cancer cells. Also called endocrine therapy.

Imaging test: A procedure that creates pictures of internal body parts, tissues, or organs to make a diagnosis, plan treatment, check whether treatment is working, observe a disease over time, or check for a recurrence.

Laboratory test: A procedure that evaluates a sample of blood, urine, or other substance from the body to make a diagnosis, guide treatment, check whether treatment is working, observe a disease over time, or check for a recurrence.

Late effects: Side effects of cancer or its treatment that occur months or years after the active treatment period has ended.

Learning resource center: A location in a hospital or cancer center where patients and families can get information about health-related topics and learn about support resources. Also called a health or hospital library.

Long-term side effects: Side effects that linger after cancer treatment has ended.

Metastasis: Cancer that has spread to other parts of the body from the place where it started.

Oncologist: A doctor who specializes in treating cancer. The main types include medical, surgical, radiation, gynecologic, and pediatric oncologists.

Oncology nurse: A nurse who specializes in caring for people with cancer.

Palliative care: Any form of treatment that concentrates on reducing a person's symptoms or treatment-related side effects, improving quality of life, and supporting patients and their families. Also called supportive care.

Patient navigator: A person, often a nurse or social worker, who helps guide survivors, families, and caregivers through the health care system by offering services such as arranging financial support, coordinating care among several doctors, and providing emotional support.

Patient Protection and Affordable Care Act: Often called "health care reform," this is a 2010 federal law that changed certain rules regarding health insurance coverage in the United States. Learn more at www.HealthCare.gov.

Physiatrist: A medical doctor who treats injuries and illnesses that affect how a person moves, including the treatment of pain. Also called a rehabilitation specialist.

Prognosis: Chance of recovery; a prediction of the outcome of a disease.

Primary cancer: The original (first) cancer with which a person was diagnosed. The primary site is where the cancer began.

Psychiatrist: A medical doctor who has special training in preventing, diagnosing, and treating mental, emotional, and behavioral problems.

Psychologist: A specialist who can talk with patients and their families about emotional and personal matters and can help them make decisions.

Quality of life: An overall sense of well-being and satisfaction with life.

Radiation therapy: The use of high-energy x-rays or other particles to destroy cancer cells. Also called radiotherapy.

Referral: Recommendation provided by a doctor to get help or information from another health care professional, specialist, or resource. Insurance companies often require a referral before they will cover visits to other health care professionals or specialists.

Rehabilitation: Services and resources that help a person with cancer obtain the best physical, social, psychological, and work-related functioning during and after cancer treatment. The goal of rehabilitation is to help people regain control over many aspects of their lives and remain as independent and productive as possible.

Risk: The likelihood of an event.

Side effect: An undesirable result of treatment, such as fatigue, diarrhea, or sexual problems.

Social worker: A professional who helps people cope with everyday tasks and challenges before, during, and after treatment. Social workers may work for a hospital, a service agency, or a local government and help address financial problems, explain insurance benefits, provide access to counseling, and more.

Stage: A way of describing where the cancer is located, if or where it has spread, and whether it is affecting other parts of the body.

Surgery: The removal of cancerous tissue from the body during an operation.

Targeted treatment: Treatment that targets specific genes, proteins, or other molecules that contribute to cancer growth and survival.

For more definitions of common cancer-related terms, visit

<https://www.cancer.net/navigating-cancer-care/cancer-basics/cancer-terms>

[illegible]

Facility Map

Medical Offices 4 & 5

3925 Old Redwood Hwy

3975 Old Redwood Hwy

4

- Pediatrics
- Foot & Ankle
- Optometry
- Ophthalmology
- Optical Sales
- Lab
- Pharmacy

5

- Surgery Center
- Occ Medicine
- Phys & Sports Medicine
- Physical Therapy
- GI
- Medical Imaging

Roundbarn Circle

3559 Roundbarn Blvd.

Neurology
Endocrinology

Chronic
Pain

Roundbarn Blvd.

3554

3558

Suite 100
Adult Mental
Health & Wellness
Chem Dependency

Suite 106
Child & Family Mental
Health & Wellness
112 Release of Med Info

Fountaingrove Parkway

Pharmacy Hours:
Medical Offices 1- 1st Fl
M-F 7:30a-9p
Sat 8a-8p Sun 8:30a-7:30p

Medical Offices 2 - 1st Fl
M-F 8:30a-6:30p

Medical Offices 4 - 1st Fl
M-F 8:30a-6:15p

Hospital - 1st Fl
Discharge Pharmacy
24 hours

Rohnert Park - 1st Fl
5900 State Farm Drive
M-F 8:30a-6:00p

Lab Hours:
Medical Office Building 2
Suite 185 - 1st Floor
M-F 6:00a-7:00p
Sat-Sun 6:00a-3:00p
Medical Office Building 4
3925 Old Redwood Hwy,
2nd Fl, Suite 243
M-F 6a-5p

Mercury Way 1st Fl
2240 Mercury Way, Ste 13
M-F 6a-5p

Rohnert Park 1st Fl
5900 State Farm Drive
M-F 6a-5p

3333 Mendocino Ave.

105 Health Ed. Classes

115 Hearing Center

130 Cosmetic Svcs/Plastic
Surg (1st Floor)

Hospital

1st Floor:

Emergency Dept

Discharge
Pharmacy
Elevator

Medical Imaging

Business Office
Financial
Counselor

Admitting

Gift Shop

Information Desk

Main Entrance

Lower Level:

MRI
Nuclear Med
Echocardiology

Security

Elevator

Conference
Rooms

Cafeteria

Medical Offices 1

1st Floor:

160
Oncology

170B
Chemotherapy Dept

170A
Infusion Ctr

Pharmacy

150
Family Medicine

Info Desk

Stairs

130
Family Medicine

145
Health Ed

140
Allergy

110
Family Medicine
Travel Clinic

125
Inject Center

120
Orthopedics

2nd Floor:

250
Family Medicine

230
Family Medicine

220 OB-Gyn/

225 Geriatrics
Infectious Disease
Rheumatology

210 OB-Gyn

215 OB-Gyn

Medical Offices 2

1st Floor:

Cardiac
Lab
Services

180
• Head & Neck
• Audiology
• Neurotology

Pharmacy

185 Lab

Member Services

Business Office

Info Desk

190
• Cardiology
• Cardiac Lab Svcs
• Pulmonary
• Sleep Lab Svcs

195
Chronic
Conditions

2nd Floor:

260/270

- BP Care
- Nephrology
- Memory
- Wound Care
- Surgery
- Breast Care

Elevator

285B
Family Medicine

285A
Family Medicine

3rd Floor:

Conf
Rooms

Elevator

320
Urology & Pre-Op

Kaiser Permanente
401 Bicentennial Way
Santa Rosa, CA 95403

Mendocino Ave.