PATIENT INFORMATION

Febrile Neutropenia

The Ottawa Hospital
Cancer Centre
Medical Oncology

General Campus
501 Smyth Road
Ottawa, ON K1H 8L6
613-737-7700
Disclaimer

This is general information developed by The Ottawa Hospital. It is not intended to replace the advice of a qualified health-care provider. Please consult your health-care provider who will be able to determine the appropriateness of the information for your specific situation.
# Table of Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction</td>
<td>1</td>
</tr>
<tr>
<td>What is febrile neutropenia?</td>
<td>1</td>
</tr>
<tr>
<td>Who will provide care in the hospital?</td>
<td>2</td>
</tr>
<tr>
<td>What is the usual care for febrile neutropenia?</td>
<td>3</td>
</tr>
<tr>
<td>Febrile Neutropenia Clinical Pathway for Days 1, 2 and 3</td>
<td>4</td>
</tr>
<tr>
<td>Febrile Neutropenia Clinical Pathway for Day 4 to Discharge Day</td>
<td>5</td>
</tr>
<tr>
<td>What can I do to help in my recovery and avoid future infection?</td>
<td>6</td>
</tr>
<tr>
<td>What do I need before I go home?</td>
<td>6</td>
</tr>
<tr>
<td>What should you expect when you go home?</td>
<td>7</td>
</tr>
<tr>
<td>Patient Survey</td>
<td>9</td>
</tr>
</tbody>
</table>
Welcome to The Ottawa Hospital. You are being admitted for treatment of febrile neutropenia. The length of your hospital stay will be determined by how you respond to your antibiotic treatment.

This booklet will tell you about febrile neutropenia and the care you will receive in the hospital. It also has information about your needs and care after you leave the hospital.

There is a survey at the end of this booklet. Please fill it out at the end of your stay, so we will know whether this booklet was helpful to you.

What is febrile neutropenia?

Febrile means you have a “fever”, which means your temperature is greater than 38.0 ° C (101.4 ° F).

Neutropenia means that there is a decrease in the number of neutrophils, which are a type of white blood cell.

This is a common side effect of standard chemotherapy and some radiation treatments. This weakens your immune system and increases your risk of getting an infection. You may have fever, chills, sweating, tiredness, urinary symptoms or other symptoms.
Who will provide care in the hospital?

Your daily health care team will include doctors, nurses, and pharmacists.

Doctors
- A staff doctor, General Practitioner in Oncology (GPO) or medical resident will:
  - see you daily
  - answer your questions
  - review your medical progress and provide medical orders.
- The oncologist assigned to the ward supervises the care of all patients admitted to medical oncology. It may not be your own oncologist.

Nurses
- Your nurse will:
  - coordinate your daily care
  - check you for signs of infection
  - give you your medications
  - assist you to care for yourself
  - teach you about your care
- The Oncology Liaison Nurse will link with the team at the Cancer Centre, as we plan your discharge, and will rebook your appointments and make you aware of them.

Pharmacist
- Your pharmacist will:
  - Review your medications and dosages
  - Talk with you about your medications if you have questions

If needed, you may also be seen by the:
- Dietitian: to review your food requirements and adjust your diet
- Physiotherapist: to help you to be as active as possible.
- Occupational Therapist: to help you manage with your daily activities.
- Social Worker: to help you and your family prepare for your discharge home, provide information about community services, etc.
• **Case Manager – Community Care Access Centre**: to arrange home nursing visits and other health care services as deemed necessary by the oncology team.

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**What is the usual care for febrile neutropenia?**

The usual, predictable care and expected outcomes for most patients with febrile neutropenia are outlined in a clinical pathway. The clinical pathway was developed by your health-care team to help plan your care. A brief version of the clinical pathway has been provided for you on pages 4 and 5. Please read the clinical pathway so you will know what to expect. Please note that your plan of care may be adjusted, based on your needs.

In addition to reading the clinical pathway, please note the following:

- All members of your health care team will help to teach you and your family. Feel free to ask questions at any time.
- Antibiotics will probably be given by intravenous (IV) for at least two days. Your doctor will switch you to antibiotics that are given by mouth, when your condition permits.
- No special diet is required for febrile neutropenia. If you eat a special diet for another reason, this will be provided. We encourage you to drink fluids as much as you are able as this will help you to recover.
- For the first 24 hours that you are in the hospital, your nurse will keep track of how much you drink and how much urine you pass. You may be asked to help keep track.
- Activity is an important part of your recovery. We will ask you to sit in a chair for each of your meals. By your second day in the hospital, when possible, you may begin walking in the hall. Each day your team will assist you to increase your activity if you are able.
## Febrile Neutropenia Clinical Pathway for Days 1, 2 and 3

| What are the goals of this phase? | • To provide you with comfort and support  
• To treat any infection that you may have  
• To teach you about your condition and how to protect yourself |
|----------------------------------|-------------------------------------------------------------------------------------------------|
| Who will see me?                 | • Nurses and doctors will see you daily  
• You may also see one or more of the following team members, if needed:  
  – Dietitian  
  – Pharmacist  
  – Physiotherapy  
  – Occupational Therapy  
  – Social Work  
  – Infectious Disease Team |
| What tests will I have?          | • Blood test on admission and every day  
• Chest X-Ray  
• Other tests if needed |
| What will happen?                | • Daily physical assessment including: Vital signs, condition of mouth, eating and drinking, signs of infection, urine and bowel function.  
• Intravenous (IV) antibiotics for at least 48 hours.  
  Your doctor will decide when you may change to oral antibiotics. |
| What do I need to know?          | • Your health care team will be teaching you what you need to know and helping you plan for “next steps.” Some of the information they will review with you will include:  
  – Neutropenia precautions/Things to avoid  
  – Mouth care  
  – Safe ambulation  
  – Assessing your support system  
  – Central venous line care (if applicable)  
  – Post-chemotherapy precautions  
  – Potential impact of febrile neutropenia episode on chemotherapy plan  
  – Discharge plan |
| What activity can I do?          | • Your health-care team will encourage you to remain active and tell you what activities are best for you |
# Febrile Neutropenia Clinical Pathway for Day 4 to Discharge Day

## What are the goals of this phase?
- To plan your discharge home and your medical follow-up
- To have you participate as much as possible in your own care
- To ensure your immune system is recovering
- To teach you about your condition and how to protect yourself
- To discharge you on Day 4 or as soon as your condition permits

## Who will see me?
- Nurses and doctors will see you daily
- You may also see one or more of the following team members, if needed:
  - Dietitian
  - Occupational Therapy
  - Pharmacist
  - Social Work
  - Physiotherapy
  - Case Manager CCAC

## What tests will I have?
- Blood test
- Other tests if needed

## What will happen?
- Daily physical assessment including: Vital signs, condition of mouth, eating and drinking, signs of infection, urine and bowel function.
- If you are on oral antibiotics and you have no fever and your immune system is recovering, you may be discharged home
- If you are on Intravenous (IV) antibiotic and you do not have a fever, the doctor will consider switching to oral antibiotics and will keep you in hospital until your immune system has recovered.
- The health care team will assess:
  - Your ability to care for yourself
  - Available home support
  - If home nursing services are needed

## What do I need to know?
- The health care team will review the following information with you before discharge:
  - Follow-up with oncologist after discharge
  - Next chemotherapy treatment
  - Your prescriptions
  - Your Health-Care Diary
  - Your Patient Designated Nurse in the cancer centre telephone number

## What activity can I do?
- You will be encouraged to do as much for yourself as possible
What can I do to help in my recovery and help to avoid future infection?

- Do not smoke (ask your nurse about programs to help you stop smoking)
- Eat a healthy diet
- Remain as active as you can be
- Follow the “Helpful Hints to Help Prevent Infection” (below)

Helpful Hints to Help Prevent Infection

- Wash your hands often during the day, especially before eating and after using the toilet.
- Encourage good hand washing by all members of your household and visitors.
- Keep your body clean.
- Perform good oral care.
- Try to avoid people with infections, for example: cold, flu, shingles, cold sores, chicken pox, mumps, measles etc.
- Avoid cleaning cat boxes and fish tanks.
- Protect yourself from cuts and skin irritation:
  - Use an electric razor.
  - During the neutropenia period, avoid the use of enemas, suppositories, douches, or tampons.

What do I need before I go home?

- Follow-up appointment(s)
- Next chemotherapy appointment
- Blood test requisition
- Other test requisitions if applicable
- Prescriptions
What should you expect when you go home?

Once you are at home you may find that you continue to feel tired and weak. This may be discouraging but it is quite common and normal. This may continue for a few weeks.

If you have any of the following symptoms — contact your patient designated nurse Monday to Friday from 9 a.m. to 4 p.m. or go to the Emergency department:

- New fever or chills
- Urinary symptoms
- Shortness of breath

DO NOT take any medication to lower your temperature until you have been seen by a doctor.

We hope you find this booklet helpful. Your suggestions for improvement would be greatly appreciated.

Please complete the survey on the next page to tell us what you think of this booklet.

Thank you,

The Ottawa Hospital – Febrile Neutropenia Clinical Pathway Team
Dear patient,

We would like to know what you think about this booklet.

Please:
• Complete the survey on the next 2 pages.
• Give the completed survey to your nurse before leaving the hospital.

**OR**
• Mail the completed survey to:
  Clinical Manager, 5 East Medical Oncology Unit
  c/o The Ottawa Hospital, General Campus
  501 Smyth Road,
  Ottawa, Ontario
  K1H 8L6

Your comments will help us to make the booklet better.

Thank you,

*Febrile Neutropenia Clinical Pathway Team*

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Dear family member/caregiver,

If you are using this booklet because the patient is not able to use it—please complete the survey questions yourself.
1. Information about the Patient

<table>
<thead>
<tr>
<th>Discharge Date</th>
<th>Year:</th>
<th>Month:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>☐ 18 – 69 years ☐ 70 years or more</td>
<td></td>
</tr>
<tr>
<td>Sex</td>
<td>☐ Female ☐ Male</td>
<td></td>
</tr>
<tr>
<td>Education</td>
<td>☐ No High School ☐ Some High School ☐ High School completed ☐ College ☐ University</td>
<td></td>
</tr>
</tbody>
</table>
| Language       | Able to read: ☐ English ☐ French ☐ Other, specify_________________
| Who is completing the survey? | ☐ Patient
|     | ☐ Family member/support person –
|     | Please tell us why the patient is not completing the survey.
|     | ________________________________________________________________ |

2. Questions about the booklet – Please check ✓ your answer

<table>
<thead>
<tr>
<th>Questions</th>
<th>Yes</th>
<th>No</th>
<th>Not Sure</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. While you were in hospital, did someone explain the purpose of the booklet?</td>
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<tr>
<td>2. While you were in hospital, did someone explain the clinical pathway?</td>
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<tr>
<td>3. Did the booklet help you to understand your care in hospital?</td>
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<tr>
<td>4. Did the booklet help you understand how you can help yourself?</td>
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<tr>
<td>5. Did the booklet help you prepare for discharge?</td>
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The Ottawa Hospital
Patient Information Booklet – Febrile Neutropenia

Patient Survey

What did you like about the booklet?

_______________________________________________________________________________________
_______________________________________________________________________________________
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How can we make the booklet better?

_______________________________________________________________________________________
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Please:

• Cut the completed survey out of the booklet
• Give it to your nurse before you leave hospital

OR

• Mail it to:
  Clinical Manager, 5 East Medical Oncology Unit
  c/o The Ottawa Hospital, General Campus
  501 Smyth Road,
  Ottawa, Ontario  K1H 8L6

Thank you very much

The Febrile Neutropenia clinical pathway team
5 East Medical Oncology Unit – The Ottawa Hospital
We’d like your comments...

Your comments are important and help us to do things better. Please take a moment to tell us how we rate.

<table>
<thead>
<tr>
<th>Category</th>
<th>Excellent</th>
<th>Very Good</th>
<th>Good</th>
<th>Fair</th>
<th>Poor</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Explanations about care</td>
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<tr>
<td>Explanations about tests</td>
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<td></td>
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<tr>
<td>Willingness of staff to answer questions</td>
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<tr>
<td>Availability of staff to meet your needs</td>
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<td>Control of your pain</td>
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<td>How do you feel that you and/or your family were assisted before leaving</td>
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<td>the hospital to manage your care at home?</td>
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<td>Courtesy of staff</td>
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<td>Cleanliness of facilities</td>
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<td>Overall how would you rate the care you received at the hospital?</td>
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<tr>
<td>Would you recommend this hospital to your family and friends?</td>
<td>No</td>
<td>Yes, probably</td>
<td>Yes, definitely</td>
<td>No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Were you served in the official language of your choice?</td>
<td>No</td>
<td>Yes</td>
<td></td>
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</tr>
<tr>
<td>If you have a disability, did the facility accommodate your special needs?</td>
<td>No</td>
<td>Yes, sometimes</td>
<td>Yes, always</td>
<td>No</td>
<td>Do not have a disability</td>
<td></td>
</tr>
</tbody>
</table>

Comments and suggestions ____________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

Would you like someone from the hospital to contact you to discuss this survey? No Yes

If yes, please tell us your name _______________________________________________________

Telephone number ________________________________________________________________

Thank you for your comments!

Please drop your completed form in the box by the unit desk or return by mail to:
Clinical Manager, 5 East Medical Oncology Unit, General Campus, 501 Smyth Road, Ottawa, ON K1H 8L6

(français au verso)