

Role of the CNS  
Neuro oncology  
Beatson WoSCC

# Background

- 1996 RGN, DipNursing
- 1997 BSc Health
- 1996-2003 Ward based Staff Nurse
- 2004 Supervisory Management Programme
- 2003-2006 Assistant Ward Manager
- 2006-Currently Neuro Oncology CNS
- 2011-Non Medical Prescribing and working towards Masters.

# Evolving Role

- Post taken up 2006 following review of service
- Multimodality treatments (Stupp)
- More sophisticated delivery
- Appointment of Specialist Radiographer
- Now have 3 Oncologists
- Medication/symptom management telephone liaison service

# Professional Networking



# Pre Treatment Assessment

- Review PS
- Review Patient/carer needs
- Offer referral to supportive services
- Address fertility/epilepsy
- Assess for clinical trial
- Review medications
- Discussion with pt and carer

- Discuss plan of care and side effects
- Written and verbal info
- Baseline investigations
- Initiate review documents
- Summary letter to GP & copy in notes
- Prescribe chemo/supportive meds and arrange next review



**Above all : Keep cool under pressure!**

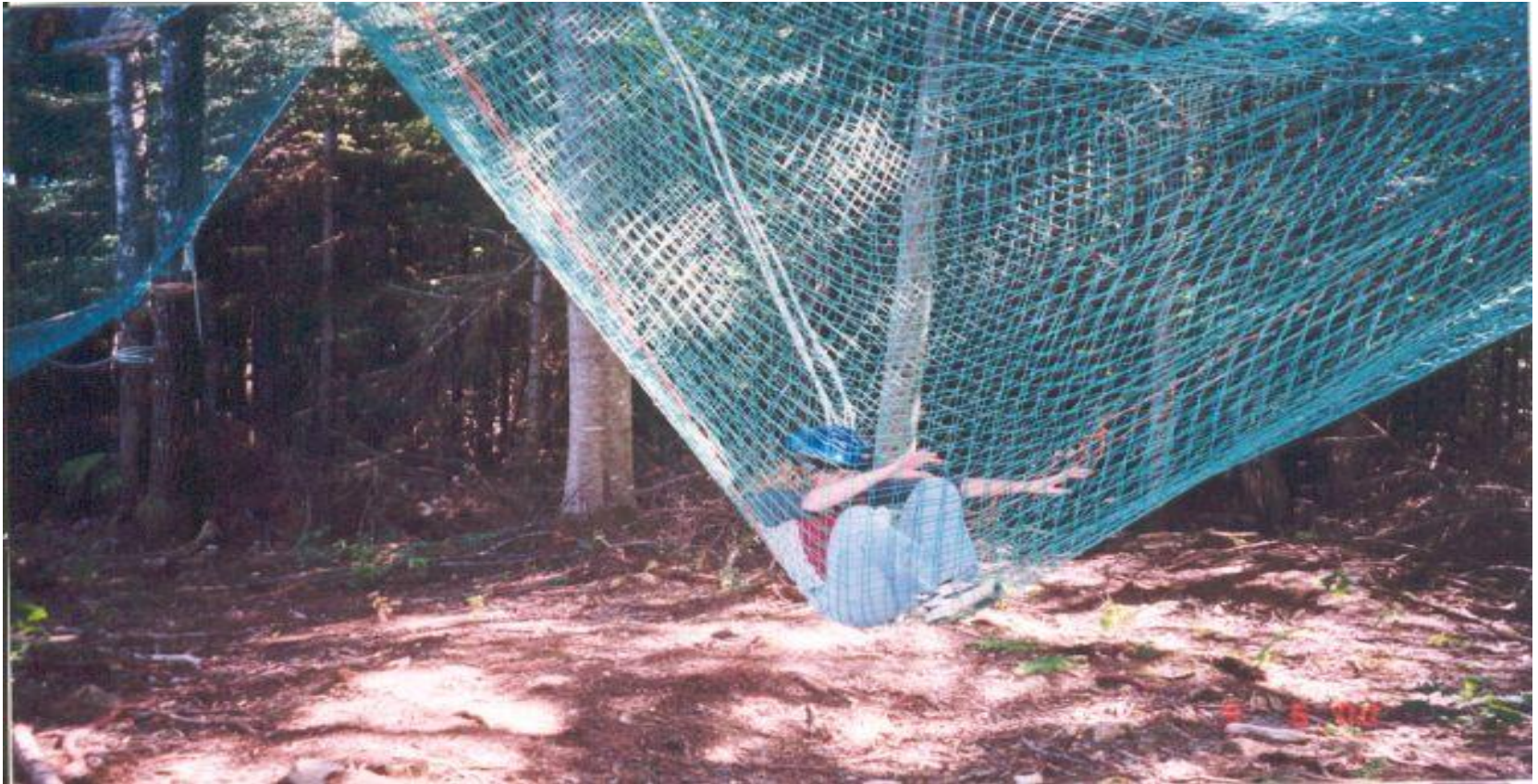
# Treatment

- Review PS, needs and symptom management weekly
- Prescribe chemo/supportive meds
- Refer to supportive agencies as wished
- End of treatment review and discussion re future plan of care
- Confirm follow up arrangements
- Discussion with pt/carer



# Support during treatment break

- Patients can feel ‘abandoned’
- Family members/spouses main carers
- Linking in to community support networks encouraged
- Uncommon diagnosis
- Contact numbers offered
- Community resources limited



**Realities of under resourced patient services mean: many patients fall through the net**

# Summary

- Treatments designed as outpatient
- Both treatments and disease can be life altering
- Optimise patients and carers ability to live well at home
- More resource for community based supportive services