YAKIN DOĞU ÜNİVERSİTESİ HASTANESİ

INFORMATION FORM AFTER CHEMOTHERAPY

Patient Name,Surname: **Date:**

Patient ID No:

Given Treatment:

Date of Birth:

Poliklinikten Ayrılırken ki Durumu

- ☐ Time/Person/Conscious
- ☐ Premedication is given before treatment: The Name of the given medicine , Dose:……..
- ☐ Nausea,no vomiting,can take liquid
- ☐ The vital sign are stable
- ☐ Painkiller medicine is given: The Name of the given medicine , Dose:……..

Medications

Name of the Medicine	Dose	Frequency	Use of Administration	Purpose

The Potantial Side Effects After The Treatment And What We Can Do Oriented to This

☐	**Innacetence/wight loss:** Eat Nutrition rich from Protein and calorie (meat,milk,egg,milk pudding,bread,grain,fruit,dessert) Feed at little and frequent intervals.Use the nutritional supplements that are suggested to you …….....
☐	**Nausea:** Try to feed at little and frequent intervals. Take the medicine that is suggested to you for nausea ……..at…….o'clock; staring from tomorrow one hour before breakfast and one hour before dinner totally using for ……days.Avoid excessive eating for saccharine,fatty ,and spicy food.İf you have nausea and vomitting for over than 12 hours call your doctor or your nouse.
	Constipation: Fibrous foods (Wholeweat bread,grains,sweet patato, broccoli,carrot,dried apricot,apricot/plum composte)Increase your fluid intake.İncrease as much as you can your physical exercise.Take the suggested…….. medicine
☐	**Diarrhea:** Consume protein and calory rich,and little amount of pulp nutrients.Avoid the consumption of fatty,spicy and pulp nutrients. Avoid caffein,fresh fruid and vegetable. Take the suggested……
☐	**Fluid Intake**.İf no contrary situations occurs,increase your amount of fluid intake in the first 2 days after taking the madication.Take an extra amount of ……. glasses of fluid(not only water,milk,yoghurt,ayran,soup,juice)
☐	**Mouth Care:** Wash your mouth with ……..for…….a day.If their is redness,chapness,wound,severe sensitivity to hot and cold please inform your doctor or nurse as soon as possible.
☐	**Fever:** Measure your body temperature if you feel shakiness,fever or sweating,if it is……..call the doctor or nurse
☐	**Infection:**Avoid going near to people with the risk of having infection (avoid being in contact with people that have contagious disease such as flu and cold)
☐	**Pain:**Do not use medication such as Aspirin or Novalgine without the doctors suggestion.Use the suggested pain killer. İf you experience a pain that you never had before call your doctor or nurse.
☐	**Tiredness:**Try to continue your daily activities.Plan walkings during early in the morning and in the evening.İf you feel tired during the activities rest
☐	**If there is any change in your normal situation call the doctor or your nurse.** Such as changes in skin,any bleeding,burning sensation during urination,shortness of breath.
☐	**For the 2 days after taking the medication**,Chemotherapy can be excreted with urine,as soon as you urinate pour a lot of water at the toilet flush the toilet one or twice
☐	**Medicine/Nutrient interaction :** MEDICINE
	NUTRİENT:

Given Education Material

Extra information/tests:

Next appointment date and time:

Nurse Name and Surname: **Doctor Name and Surname:**

Signature: **Signature:**