



Providence  
SWEDISH

# Providence Swedish Cancer Institute **New Patient Guide**

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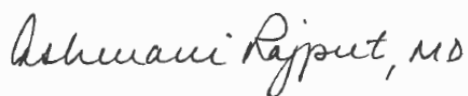
# Welcome to Providence Swedish Cancer Institute

Thank you for choosing the Providence Swedish Cancer Institute for your care. We understand being diagnosed with cancer can be overwhelming but we hope that you find this patient guide useful both in planning your visits, and as an educational resource.

Our personalized medicine program is multi-faceted. Understanding the characteristics of your cancer allows us to tailor therapy recommendations that are unique to you. Our treatment and supportive health care teams craft a program that fulfills our promise of personalized medicine. Providence Swedish Cancer Institute's robust research programs are leading the way in both providing cutting edge treatment options and creating better answers for the future. You may be invited to learn more about specific research initiatives depending on your situation.

If you have any questions, please do not hesitate to ask any staff member for more information. If you don't know who specifically to ask, you can call us at 1-855-XCANCER and we will direct you to the right place.

To your best health,



**Ashwani Rajput, M.D., FACS**

*Executive Medical Director*

*Providence Swedish Cancer Institute*

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# How To Use This Binder

This binder serves as a resource with information to guide you through your cancer care at Swedish Cancer Institute. We encourage you to use the interactive tools included to help you actively partner in your care. You may also receive additional resources from your health care team.

## Bring this binder to appointments

Use the information in this binder as a reference when discussing care



## Take notes

Take notes within the “notes” sections provided on a page



## Use the QR codes

Scan QR codes with your phone, iPad, or tablet for more information on a topic  
Use the QR Code Index on pages G-94 – G-97 to see the website links



Request printed or digital copies of an individual page or section in this binder by emailing **[psci.education@swedish.org](mailto:psci.education@swedish.org)** or calling **206-386-3200**.

# Getting Started





# Getting Started

**A cancer diagnosis may cause many emotions. This section gives you information that can help you manage what comes next.**

## Personalized Medicine at Swedish

Our goal is to consider each person's unique needs:

- Physical
- Psychological
- Social
- Spiritual

We use current best practices to address cancer risk and develop personalized treatment options.

## Personalized plan

Your recommended treatment plan is determined by:

- Cancer type
- Cancer stage
- Your overall health
- Your personal preferences

These factors will also determine who is involved in your medical care team.

## Your Role

Strong communication with your health care team can empower you, improve your sense of satisfaction, and increase your quality of care.



# Your Health Care Team

There may be many people involved in your care including, but not limited to:

- **Primary Oncologist/Hematologist** - leads treatment decisions and consults with other providers as needed
- **Surgeon** -
- **Radiation Oncologist** - specializes in using radiation therapy for cancer treatment
- **Oncology Nurse** - trained expert in caring, treating, and providing support for patients with cancer and their families
- **Nursing Assistant, Medical Assistant, and other support staff** - help prepare patients for exams, assist with procedures, and more
- **Oncology Social Worker** - assists with financial, transportation, housing, and emotional health concerns

- **Patient Service Specialist (PSS)** - assists in checking you in and scheduling appointments
- **Patient Financial Counselor** - offers financial advice, help with medical bills, and communicates with insurance about billing matters

My Health Care Team

My Doctor \_\_\_\_\_

Clinic Number \_\_\_\_\_

Other Members \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



# What you need to know

## Visitor Policy

Visitor policies may vary at different locations and are subject to change.

**For your safety & the safety of others, children under the age of 16 are not allowed at Swedish Cancer Institute because:**

- Many patients with cancer have a weakened immune system
- Treatment areas have potentially hazardous materials

Patients should read their appointment details, check the website, or call the doctor's office to find out who can join them at their appointment.

Swedish Cancer Institute is committed to providing culturally competent and compassionate care. We respect the identities of all patients and are dedicated to addressing each person's whole identity. To do so, we collect important cultural, demographic, and medical information from all patients including:

- Chosen Name
- Pronouns
- Gender Identity
- Relevant Surgical History

*Communicating this information is voluntary for all. Please let our caregivers know if you have any questions.*

*(Continued)*

# What you need to know (continued)

## For each appointment

- Arrive 15 minutes early and bring your most up to date insurance card:
  - Avoid billing errors
  - Faster prior authorizations

*\*New patients may need to arrive earlier to complete forms.\**

- At each appointment, you may be asked to complete some additional questions so we can plan for your care needs.

- Your health care team will ask you about your symptoms at each visit. For more information on symptoms, please see page E-51 – E-66.
- If you require communication assistance, please let your health care team know or call **888-311-9127**. Communication assistance includes:
  - Language
  - Vision
  - Hearing

## Contact your health care team if you experience the following symptoms:

- |                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                         |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none"><li>• Fever over 100.4 F</li><li>• Shaking or chills with or without fever</li><li>• New or persistent cough</li><li>• Unusual bleeding or bruising</li><li>• Sore mouth, sore throat, trouble swallowing</li><li>• Trouble thinking clearly</li><li>• Dizziness, headaches, or tremors</li></ul> | <ul style="list-style-type: none"><li>• Change in urination</li><li>• Change in bowel movements</li><li>• Unintentional weight loss or gain of more than 5 lbs</li><li>• New, different, or uncontrolled pain</li><li>• Uncontrolled nausea or vomiting</li><li>• New or increased swelling, drainage, or pus</li></ul> |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**Please call \_\_\_\_\_ 24/7 to speak with your health care team or the doctor on call.**

# MyChart Registration



Signing up for MyChart is easy and can save you time.

## It allows you to:

- View your medical records
- View and schedule appointments
- Communicate with your health care team
- Speed up registration
- View and pay bills



Scan this QR code for more information.

To log in or register for MyChart, please visit [www.swedish.org/patients-and-visitors/mychart](http://www.swedish.org/patients-and-visitors/mychart) and follow the instructions or ask your health care team for assistance.

## When to Call vs When to Visit Your Doctor

**\*Go to the emergency room as recommended by your doctor or if you need immediate attention.\***

| MyChart Messaging<br>(Non-urgent messages:<br>Allow 24-72 hours to respond)                                                                                                                                                                                          | Phone Call<br>(Requires same-day<br>response)                                                                                                                   | In-Person Visit<br>(Per Doctor's decision)                                                                                                                                                                     | Virtual Visit<br>(Per Doctor's decision)                                                                                                                                                                                                                       |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none"> <li>• Scheduling questions or concerns</li> <li>• Updates not requiring a response</li> <li>• Referral requests</li> <li>• Medication Refills<br/>(Contact your pharmacy for a refill. Allow 24-72 hours for request.)</li> </ul> | <ul style="list-style-type: none"> <li>• New or uncontrolled symptoms</li> <li>• Refer to "When to Call the doctor" magnet or page B6 in this binder</li> </ul> | <ul style="list-style-type: none"> <li>• New patient visits</li> <li>• Treatment related follow-up visit</li> <li>• Research visit</li> <li>• New or uncontrolled symptoms</li> <li>• Care Planning</li> </ul> | <ul style="list-style-type: none"> <li>• Routine follow-up, imaging, lab review, or new symptoms without need for physical assessment</li> <li>• Active infection (e.g. COVID) but requires follow-up</li> <li>• Patient lives far away from clinic</li> </ul> |

**NOTE: This is a general guideline. Please talk to your clinic staff for additional advice. Your needs are a priority.**

# Supportive Care Services

Swedish Cancer Institute offers many therapies and services that can be added to your treatment care plan. Many of these services are free. Please ask your health care team for more information and an up-to-date list of supportive care services available to you.



## Acupuncture

- Lessen unwanted symptoms and side effects
- Enhance overall wellness
- Call **206-386-2717** for more information or to make an appointment



## Art Therapy

- Express emotions, reduce side effects, and relax through:
  - Painting
  - Drawing
  - Sculpting
  - Visual media
- No artistic training or experience is necessary
- Call **206-309-5437** or email **SCIArtTherapy@swedish.org** for more information or to schedule an appointment



## Cancer Education Center

- Resource center with cancer education materials:
  - Brochures, books, videos and audiotapes
- Free wig fits and one free wig
- Located at First Hill
  - Education resources also available at all campuses
- Call **206-386-3200** or email **SCI.Education@Swedish.org**



## Cancer Rehabilitation

- Improves body function with physical and occupational therapy
- Personalized and supervised fitness programs
- Call **206-215-6333** for more information or to schedule an appointment



## Counseling and Support: Cancer Psychiatry and Oncology Social Work

- Psychiatrists and oncology social workers help patients, families, and caregivers cope with the stress of cancer
- To speak with a social worker, call:
  - **206-386-3228** for First Hill
  - **206-781-6359** for Ballard
  - **425-673-8328** for Edmonds
  - **425-313-4224** for Issaquah
- For more information about psychiatry, call **206-991-2383**.

(Continued)

## Supportive Care Services (continued)



### Survivorship

- Enhances your care and well-being during and after treatment
- Connects your cancer health care team and primary care provider
- Call **206-386-3200** for more information



### Classes and Support Groups

- Free for patients, family, friends and caregivers
- Visit the website for a full list of classes
- Call the Cancer Education Center at **206-386-3200** or email **SCI.Education@Swedish.org** for more information or to register



### Hereditary Cancer Clinic

- Genetic testing and counseling for patients and families at risk for hereditary cancers, including:
  - Breast, ovarian, and colon
- Call **206-215-4377** for more information or to schedule an appointment



### Massage Therapy

- Relieves cancer-related side effects
- Personalized massages based on your needs
- Call **206-527-9709** for more information or to schedule an appointment



### Music Therapy

- Sessions include:
  - Talking with a counselor
  - An activity that involves music and sound
- No musical experience necessary
- Call **206-386-6711** for more information



### Naturopathic Therapy

- Complement your treatments with:
  - Nutrition
  - Herbal medicines
  - Mind-body therapies
- Improve your immune system and reduce side effects
- All treatments are coordinated with your oncologist
- Call **206-386-3015** for more information or to schedule an appointment



### Nutrition Counseling

- Registered dietitians help patients make the best dietary decisions during their cancer treatment
- No referral needed
- Call **206-215-6213** for First Hill and Ballard
- Call **425-640-4329** for Edmonds

(Continued)

## Supportive Care Services (continued)

### Swedish Foundation



When Teri was diagnosed with breast cancer, she was completely caught off guard. She turned to Swedish for her cancer care — care that's backed by research and delivered with compassion.

The Swedish Foundation supports numerous programs such as research, supportive care services and staff resources.

Donations from the community help to make programs like these at Swedish possible. To donate or learn more about how you can support our programs contact: Jeff Walker at 206-386-3194 or [jeff.walker@swedish.org](mailto:jeff.walker@swedish.org). You can also donate online at [swedishfoundation.org/our-priorities/cancer-institute](https://swedishfoundation.org/our-priorities/cancer-institute).



# Locations and Contacts



# Contacts

## Arnold Pavilion Specialty Pharmacy

**206-386-6020**

24/7 on-call pharmacist:

**206-386-6020**

## Billing

General: **1-877-406-0438**

Hospital: **206-320-5300**

Medical Group: **206-320-4476**

## Breast Center

First Hill True Family Women's Cancer Center:

**206-215-6400**

Issaquah: **425-313-7170**

## Cancer Education Center

**206-386-3200**

## Financial Counseling

General: **1-877-406-0438**

Direct: **503-215-7575**

## Medical Imaging

First Hill: **206-215-3900**

First Hill PET/CT: **206-215-6487**

First Hill Breast Imaging: **206-215-8100**

Ballard Breast Imaging Center: **206-781-6349**

Edmonds: **425-640-4260**

Issaquah: **425-313-5400**

## Medical Oncology

First Hill: **1-855-922-6237**

First Hill Treatment Center: **206-386-2525**

Ballard: **206-781-6364**

Ballard Treatment Center: **206-781-6107**

Edmonds: **425-673-8300**

Issaquah: **425-313-4200**

## Medical Records

**206-320-3850**

## Patient Financial Advocate

**206-386-6996**

## Radiation Oncology

First Hill: **206-386-2323**

Radiosurgery: **206-386-6707**

Edmonds: **425-640-4300**

Issaquah: **425-313-4200**

## Swedish Campus Operators

All campuses: **206-386-6000**

If you need assistance navigating the Swedish Cancer Institute directory, please call **855-XCANCER (855-922-6237)**.



[Scan here for more information.](#)

### Parking Information

For current parking rates and other information, contact Swedish Parking and Commuting Services at **206-386-2235**.

### Parking permits for people with disabilities Applications are available at:

- Your physician's office
- The King County Administration Building

A signature by your healthcare provider is required.  
Please talk to your health care team for assistance.



[Scan here for more information.](#)

### Medical Preferential Loading for WA State Ferries

Allows you to load first and travel on the next available scheduled sailing.

This form requires a signature by your health care provider.

## Transportation

Talk to your health care team or contact our Social Work department for more transportation information, including resources on:

- Taxi vouchers
- Transportation assistance to and from appointments
- Guidance on documents required for travel while receiving treatment

# Locations

**Edmonds** 21632 Highway 99, Edmonds, WA 98026 | **T: 425-673-8300**

Monday & Tuesday, 8:30 a.m. to 6:00 p.m. | Wednesday & Thursday, 7:30 a.m. to 5:00 p.m.



## DIRECTIONS

**Northbound I-5:** Take exit 179 for 220th Street. Turn left on 220th Street. Continue, then turn right on Highway 99. Medical Oncology will be on the left.

**Southbound I-5:** Take the 220th St. Mountlake Terrace exit (179). Turn right onto 220th Street. Turn right onto Highway 99. Medical Oncology will be on the left.

## PARKING

Parking is free.



## Ballard

5300 Tallman Ave. NW, Seattle, WA 98107 | **T: 206-781-6107** | Monday-Friday, 8:00 a.m. to 4:30 p.m.  
**For direct access and parking instructions, please use 5409 Barnes Ave. NW, Seattle, WA 98107.**

### DIRECTIONS

**Northbound I-5:** Take the 45th Street exit (169). Turn left onto 45th Street. 45th Street becomes 46th Street, and then changes to Market Street. Continue on Market Street and turn left onto Tallman Avenue NW. Swedish Cancer Institute Medical Oncology Clinics and Medical Treatment Center are located on the second floor of the hospital.

**Southbound I-5:** Take the 8th Street exit (172). Turn right onto 85th Avenue NW. Continue on 85th Street until you reach the intersection of 15th Avenue NW and NW Market Street. Turn right onto NW Market Street. Turn left onto Barnes Avenue NW. Swedish Cancer Institute Medical Oncology Clinics and Medical Treatment Center are located on the second floor of the hospital.

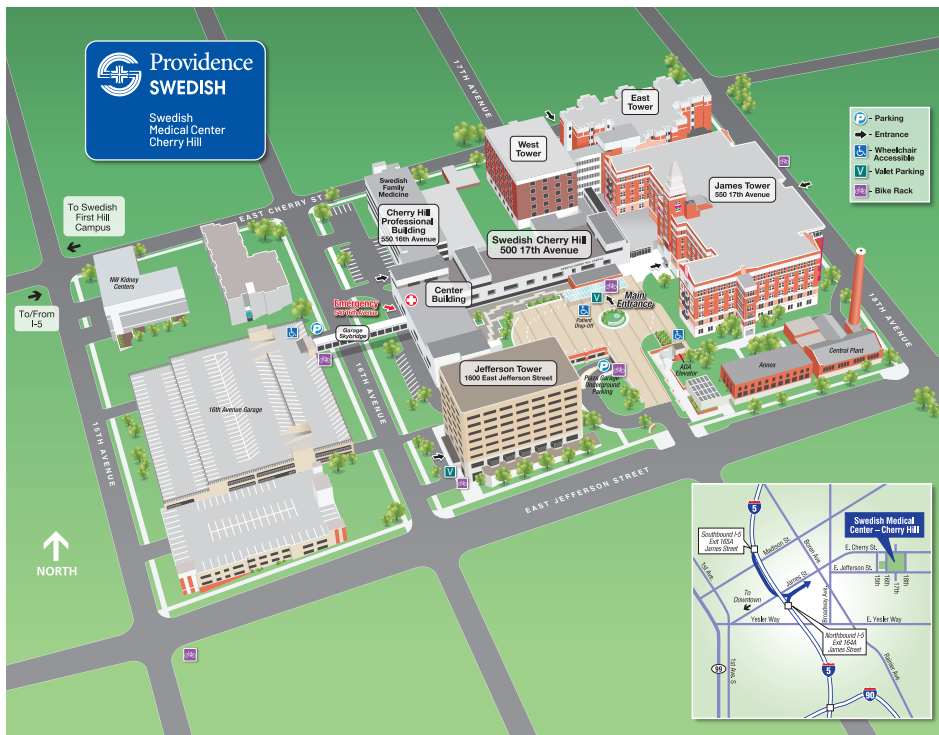
### PARKING

Paid parking is available in the parking garage across the street from the hospital on Tallman Avenue NW. Paid street parking is also available.



## Cherry Hill

500 17th Ave., Seattle, WA 98122 | **T: 206-320-2000** | Monday-Friday, 8:00 a.m. to 5:00 p.m.



### DIRECTIONS

**Northbound I-5:** Take the James Street exit (164A). Turn right on James Street. Continue on James Street; the street will become Cherry Street. Turn right on 16th Street and the parking garage is on the right.

**Southbound I-5:** Take the James Street exit (164). Turn left on James Street. James Street will become Cherry Street. The hospital is on the right side past 16th Avenue.

### PARKING

Paid parking is available in the Cherry Hill hospital parking garage. Enter the hospital through the sky bridge.



## First Hill

1221 Madison St., Seattle, WA 98104 | **T: 855-922-6237** | Monday-Friday, 8:30 a.m. to 5:00 p.m.

### DIRECTIONS

**Northbound I-5:** Take the James Street/Madison Street exit (164A). Keep left toward 7th Avenue. Turn right onto Madison Street. Continue on Madison Street. Swedish Cancer Institute is on the right-hand side.

**Southbound I-5:** Take the James Street exit (165A). Turn left onto James Street. Turn left on Boren Avenue. Turn right on Madison Street.

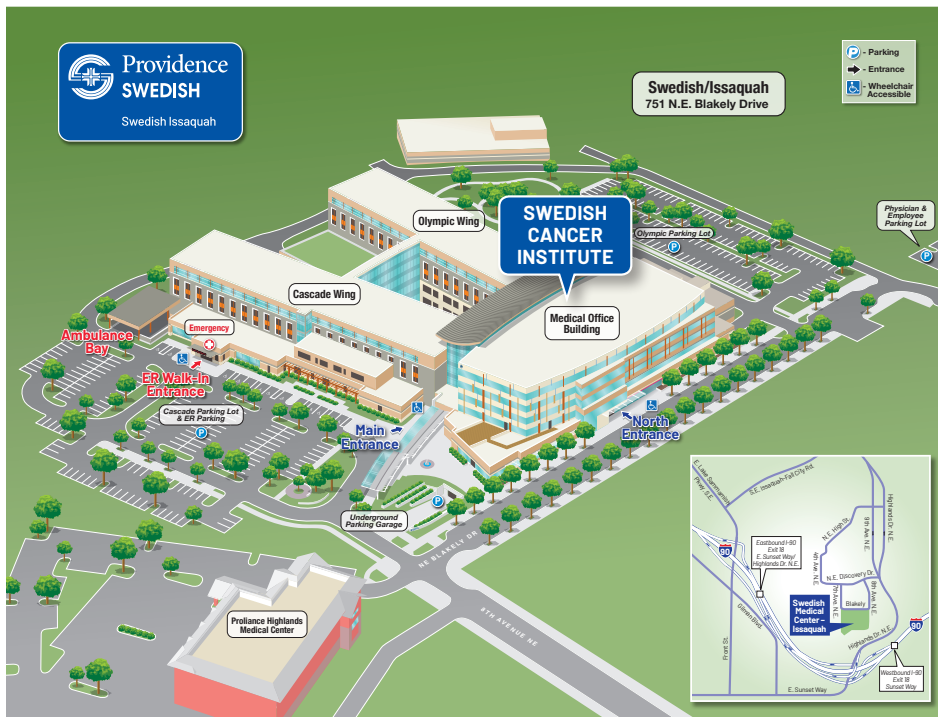
### PARKING

Paid parking is available in the Nordstrom Tower, closest to the Arnold Pavilion. There are other parking garages on 747 Broadway, 601 Minor Avenue, and 601 Broadway. Paid street parking may also be available.



## Issaquah

751 NE Blakely Drive, Issaquah, WA 98029 | **T: 425-313-4200** | Monday-Friday, 8:00 a.m. to 5:00 p.m.



### DIRECTIONS

#### Traveling east on I-90:

Take the E. Sunset Way-Highlands Drive exit (No. 18). Go left at the "Y" and continue onto Highlands Drive. Turn left at the first traffic light onto NE Discovery Drive. Turn left onto 7th Avenue.

#### Traveling west on I-90:

Take the E. Sunset Way-Highlands Drive exit (No. 18). Turn right onto Highlands Drive. Turn left at the first traffic light onto NE Discovery Drive. Turn left onto 7th Avenue.

### PARKING

Parking is free. Surface lot parking and underground parking garage available.





# My Care Plan



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# My Treatment Plan

| Do Not Forget | Treatment Name: |        |         |           |          | Number of Cycles: |          |
|---------------|-----------------|--------|---------|-----------|----------|-------------------|----------|
|               | Sunday          | Monday | Tuesday | Wednesday | Thursday | Friday            | Saturday |
|               |                 |        |         |           |          |                   |          |
|               |                 |        |         |           |          |                   |          |
|               |                 |        |         |           |          |                   |          |
|               |                 |        |         |           |          |                   |          |
|               |                 |        |         |           |          |                   |          |
|               |                 |        |         |           |          |                   |          |

| Do Not Forget | Treatment Name: |        |         |           |          | Number of Cycles: |          |
|---------------|-----------------|--------|---------|-----------|----------|-------------------|----------|
|               | Sunday          | Monday | Tuesday | Wednesday | Thursday | Friday            | Saturday |
|               |                 |        |         |           |          |                   |          |
|               |                 |        |         |           |          |                   |          |
|               |                 |        |         |           |          |                   |          |
|               |                 |        |         |           |          |                   |          |
|               |                 |        |         |           |          |                   |          |
|               |                 |        |         |           |          |                   |          |

| Do Not Forget | Treatment Name: |        |         |           |          | Number of Cycles: |          |
|---------------|-----------------|--------|---------|-----------|----------|-------------------|----------|
|               | Sunday          | Monday | Tuesday | Wednesday | Thursday | Friday            | Saturday |
|               |                 |        |         |           |          |                   |          |
|               |                 |        |         |           |          |                   |          |
|               |                 |        |         |           |          |                   |          |
|               |                 |        |         |           |          |                   |          |
|               |                 |        |         |           |          |                   |          |
|               |                 |        |         |           |          |                   |          |

# What is Cancer?

**Cancer is when cells become abnormal and multiply without order or control. An abnormal mass of cells is called a tumor.**

## Tumors can be:

- "Benign" = harmless
- "Malignant" = cancerous

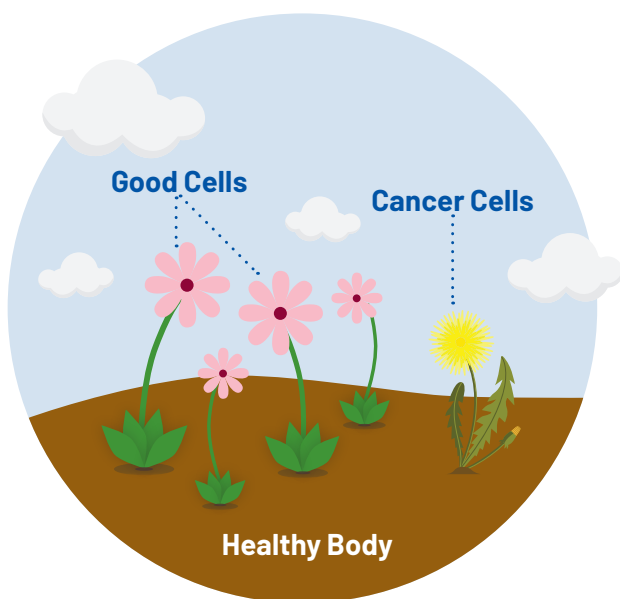
## How does cancer spread?

- Cancer spreads via the bloodstream or lymphatic system (bone marrow, lymph nodes, and spleen)

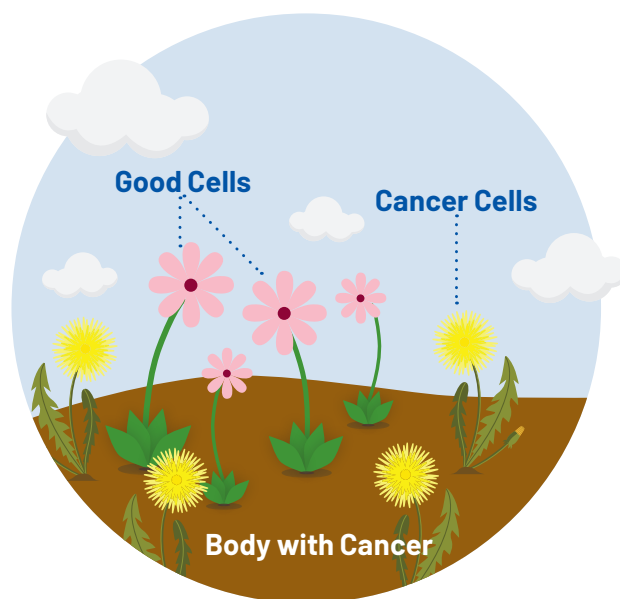
## Metastasis

- The spread of cancer is called metastasis
- Cancer cells can break away from a malignant tumor and spread to:
  - Surrounding tissues and organs
  - Other parts of the body

**Picture your body as a garden and the soil is your immune system.**



**When your body is healthy, the soil is able to prevent weeds from growing.**



**Cancer cells are like weeds. When uncontrolled, the cells consume all of the nutrients and take over the garden.**

Images inspired by Immunooncology.com ©2021 Bristol-Myers Squibb Company

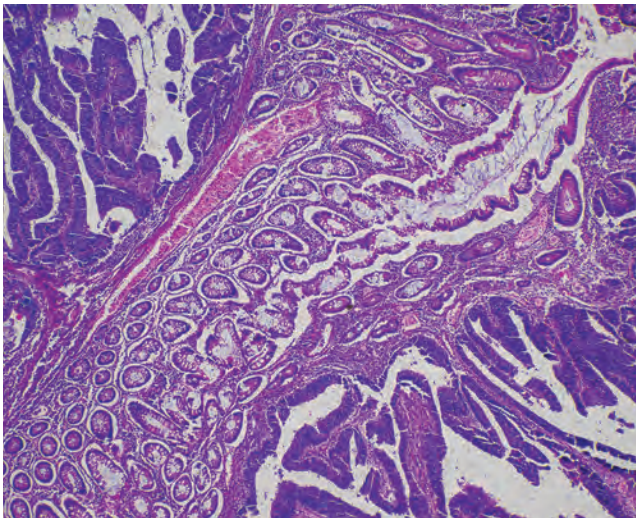
# Diagnosing and Staging Cancer

## How is cancer found and diagnosed?

- Found with routine screenings or tests prompted by symptoms (i.e., blood tests or scans)
- Diagnosed with biopsies or surgery to remove the tumor/sample for further testing

Once a diagnosis is confirmed, the next step is “staging” or determining how far the cancer has spread. General terms used are:

- **“Local”** - confined to one place
- **“Regional”** - spread to the general area around the tumor and nearby lymph nodes
- **“Distant”** - spread to other parts of the body



The staging systems used will depend on various factors such as your cancer type, its clinical presentation, pathology findings, and testing done after treatment.

## Staging systems also use roman numerals and letters to describe cancers.

- Roman numerals are used to describe stages 0 through IV (0-4). The higher the number, the more serious the cancer.
- Staging systems also use letters:
  - T** - describes the size of the tumor and if it has spread into surrounding tissues and organs
  - N** - describes how far the cancer has spread to nearby lymph nodes
  - M** - shows whether the cancer has spread to other organs in the body

Along with the TNM system, your health care team will look at other characteristics of the cancer to create a personalized treatment plan for you.

## Pathology Report

Your diagnosis will be described using a pathology report. For more information on the components of pathology reports, please scan the QR code.



[Scan here for more information.](#)



Swedish Cancer Institute  
Clinic Address  
Clinic Phone Number

**Patient Name:** John Doe  
**Medical Record Number (MRN):** 6000XXXXXX

---

**Specimen ID:** SX-XXXXXX

*Identifies your pathology sample. Can include descriptions of type and source of tissue collected.*

**Collection Date/ Time:** 00/00/0000, 0:00 AM/PM

*Date sample collected.*

**Status:** Final Result

*Whether or not the tests are complete*

---

**Narrative/ Clinical Information:**

*Describes patient's clinical background and results of other relevant tests that have been done. Includes ICD 10 codes, otherwise considered medical shorthand for diseases, signs/ symptoms, etc.*

**Sex:** N/A

**Date of Birth:** 00/00/0000

**Case Number:** SX-XXXXXX

*Identifies the specific pathology report.*

**Pathology Report:** SX-XXXXXX

*Identifies the specific pathology report.*

---

**Final Diagnosis:**

*Detailed listing of individual samples reviewed by pathologist and final interpretation of findings including comments on margins, lymph node involvement, and staging.*

**Diagnosis Comment:**

*The pathologist's further discussion of the final diagnosis.*

**Microscopic Description:**

*Description of sample under microscope.*

**Gross Description:**

*Considers findings that can be identified by sight or touch. Looks at size & weight, anatomic features, and more. Includes the alphabetical listing of each sample reviewed.*

**Immunohistochemistry study:**

*Includes findings from additional lab tests conducted.*

**Name/Date/ Time:**

*Name of pathologist providing interpretation and the date/ time the test was completed. May also include the name of the referring physician.*

---

**Notes:**

# Surgery

## Surgery is often the first form of treatment for cancer. The goals of surgery can be:

- Diagnosis
- Cancer removal
- Symptom relief

It is important to closely monitor the surgical site following surgery. Report any changes to your health care team, if you experience:

- New/increased pain
- New/increased drainage
- Signs/symptoms of infection
  - Fever, pus, chills, redness
- Fresh and/or continued bleeding

## Things to know:

- Follow your doctor's directions on eating and taking medications
- After surgery, a sample of your tumor may be collected and sent to a pathologist for further testing
  - Pathology looks at tissue/ cells that are not normal
- Your pain can and should be managed
- Write down a list of questions
- Communicate any changes or concerns with your health care team

## Ask your health care team for the "Swedish Guide to Surgical Procedures" for more information.



### Swedish Guide to Surgical Procedures

| Procedure location           | Preregistration phone number | Preadmission clinic scheduling phone number |
|------------------------------|------------------------------|---------------------------------------------|
| Ballard campus               | 206-215-3200                 | 206-386-2314                                |
| Cherry Hill campus           | 206-215-3200                 | 206-386-2314                                |
| First Hill campus            | 206-215-3200                 | 206-386-2314                                |
| Swedish Orthopedic Institute | 206-215-3200                 | 206-386-2314                                |
| Issaquah campus              | 206-215-3200                 | 206-386-2314                                |
| Edmonds campus               | 425-640-4220                 | Edmonds will call you directly              |
| Toll-free for all campuses   | 866-851-5111                 | N/A                                         |

### Preparing for your surgical procedure

**Welcome to Swedish.** Our goal is to ensure your experience at Swedish is excellent in every way. Please review the following steps to prepare for your upcoming surgical procedure:

#### STEP 1: Call to preregister

- After confirming your procedure date and Swedish location, call to complete your preregistration as soon as possible to provide your personal and insurance information to our team.
- Please return any voice messages requesting a callback.
- Be ready with your insurance card and information.

#### STEP 2: Schedule your preadmission clinic interview

- After confirming your procedure date and Swedish location and completing your preregistration, call to schedule a preadmission clinic phone interview as soon as possible. For patients having a procedure at our Edmonds campus, a caregiver from our Edmonds campus preadmission clinic staff will call you directly within seven days of your scheduled procedure.
- Please return any voice messages requesting a callback.
- Procedures, surgery and anesthesia can affect all organ systems. At Swedish, we are committed to minimizing your procedural risk.
- The preadmission clinic phone interview will ensure you are ready for your procedure and will help avoid a delay or cancellation on the day of your procedure.

- The preadmission clinic phone interview generally takes 30–60 minutes. During the call, a nurse will review your health history and medications and provide preprocedural instructions.

#### To prepare for your preadmission clinic appointment:

- Complete any ordered labs and tests as soon as possible so the results may be reviewed by the preadmission clinic team. Many procedures and most surgeries require labs from within six months. Please consult with your provider or surgeon if labs have not yet been ordered.
- Schedule a preoperative evaluation with your primary care provider or specialist, such as your cardiologist or pulmonologist, so these records may be reviewed by the preadmission clinic team.

#### Please prepare information regarding:

- Your current medications, including dosages.
- COVID-19 infection status from within the last 12 weeks.
- Any recent emergency department visits or hospitalizations.
- Any history of anemia, low blood counts or ongoing bleeding.
- Stroke within the last 12 months.
- Heart attack within the last 12 months.
- Cardiac surgery, cardiac stent placement or other cardiac procedure in the last 12 months.

1

## Questions to ask your surgeon or health care team

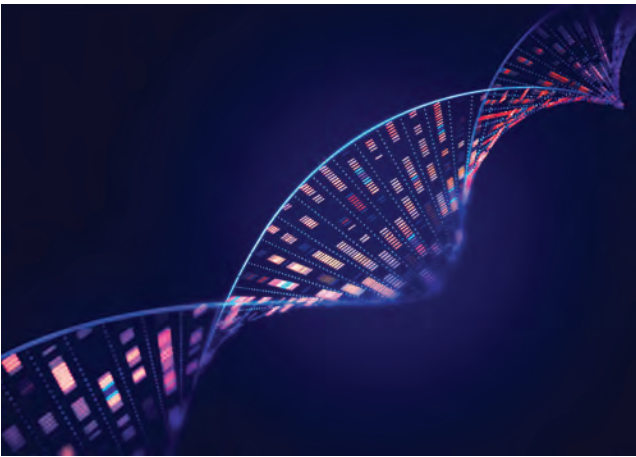
- Why do I need this surgery?
- What are the risks of this surgery?
- What kind of anesthesia will I have?
- Will I have new medications because of this procedure?
- How long will I be in the hospital or surgery center?
- What will my recovery be like?
- When can I return to routine activities?
- Will I have scarring? What will it look like and where will it be?
- Who should I call with concerns?

# Genetic Testing

Genetic testing can provide helpful information for deciding on appropriate cancer treatment plans and to guide future cancer screening and prevention strategies.

The Hereditary Cancer Clinic at Swedish Cancer Institute offers genetic counseling and testing **(germline genetic testing)** to help determine whether cancers in your family are hereditary. Licensed genetic counselors work with your health care team to integrate genetic testing results into your personalized care plan.

A separate genetic test **(somatic genetic testing)** can also be run on a tumor itself. This test is typically ordered by an oncologist and helps guide treatment of a specific tumor.



| Germline Genetic Testing                                                                                                                                           | Somatic Genetic Testing                                                                                                                |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|
| Taken via blood or saliva sample.                                                                                                                                  | Taken via tumor specimen.                                                                                                              |
| Used to determine if someone was born with a high risk for developing cancer, often inherited from parents or other biological family members.                     | Used to determine what genetic (somatic) mutations the cancer itself has developed, which can occur over the course of one’s lifetime. |
| Helps your oncologist predict whether someone faces a high risk for a future cancer.                                                                               | Helps your oncologist predict how a cancer may behave and select the most appropriate drugs to treat that cancer.                      |
| Your results will be discussed by your health care team and/or Genetic Counseling team who will go over their impact to you, your family, and your treatment plan. | Your results are interpreted by an oncologist or surgeon who will determine your personalized treatment plan.                          |
| Results are confidential and may take up to 3 weeks.                                                                                                               | Results are confidential and may take 1-2 weeks.                                                                                       |

(Continued)

## Genetic Testing (continued)

### What You Need to Know

- Genetic testing may be identified as an important tool in your treatment plan by your health care team.
- Your health care team may refer you to the Hereditary Cancer Clinic and/or order additional genetic tests.
- Genetic testing may be done by blood or saliva.
- Genetic test results are confidential. Results may take several days or 2-3 weeks.
- Genetic test results and what they mean to you, your family, and your treatment will be discussed by your health care team and/or the Genetic Counseling team.

### Genetic Counseling: What to Expect

- A member of your health care team may refer you to a genetic counselor.
- Visits may occur in-person or virtually.
- Appointments may last 30-90 minutes.
- Genetic counselors will review if genetic counseling is right for you.

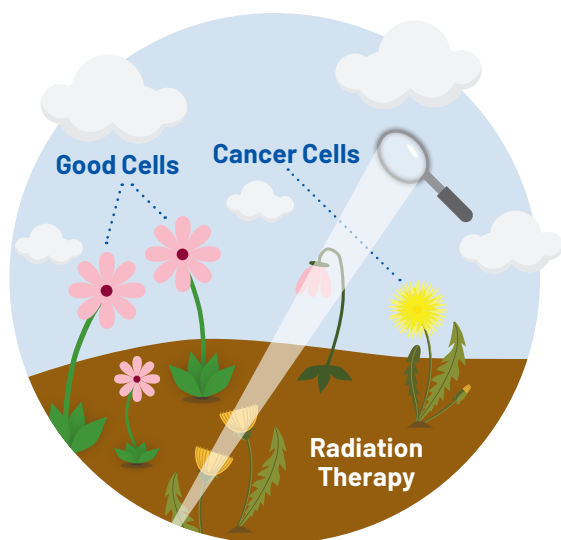


*Scan this code to learn more about genetic testing for cancer risk.*



*Scan this code to learn more about the Hereditary Cancer Clinic at SCI or call 206-215-4377.*

## Radiation Therapy



*Image inspired by Immunooncology.com ©2021 Bristol-Myers Squibb Company*

### How does radiation therapy work?

#### High-energy X-rays kill cancer cells.

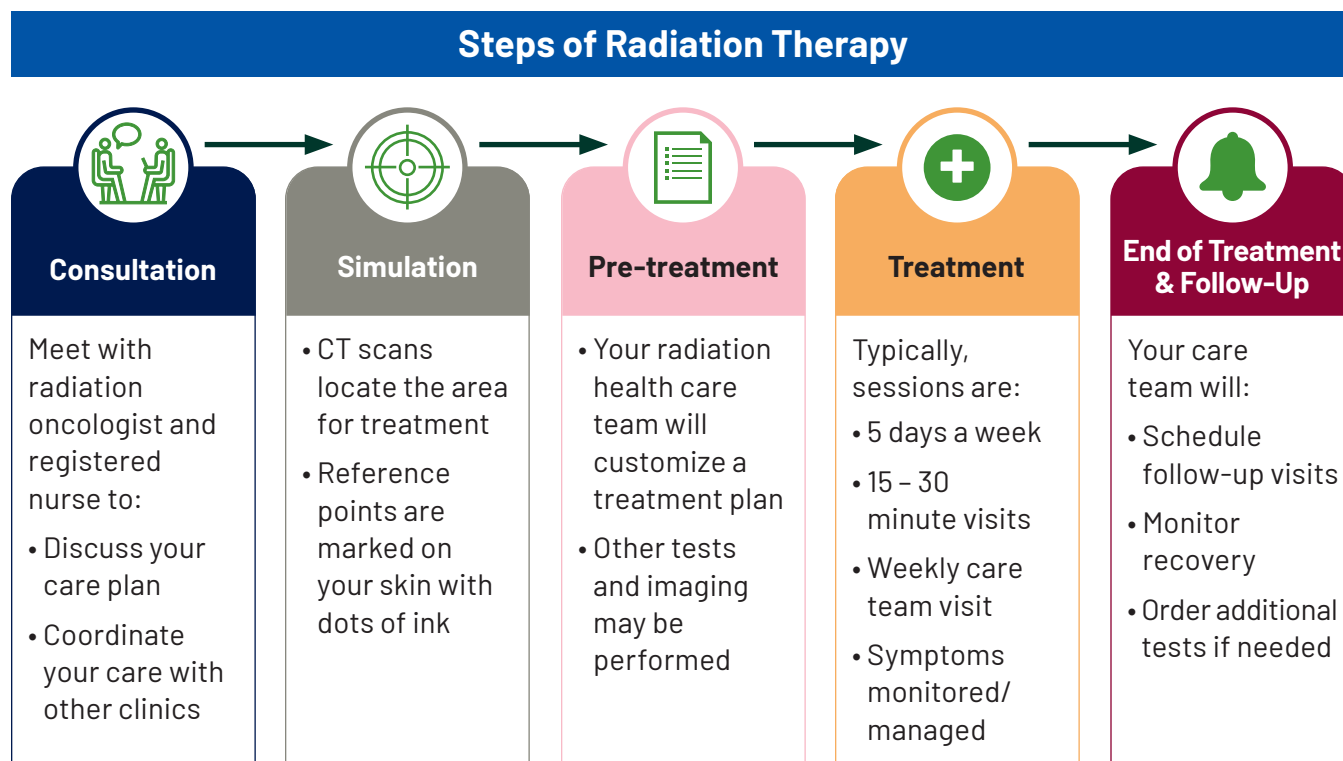
- Destroys the genetic material that controls cell growth and division.

#### Both healthy and cancerous cells are damaged by radiation therapy.

- Goal is to limit damage to healthy cells.
- Healthy cells can recover from damage; cancer cells cannot.

*(Continued)*

## Radiation Therapy (continued)



### How is radiation therapy delivered?

- **External beam radiation:** Uses a linear accelerator machine outside of the body to send a beam of radiation to the tumor.
- **Internal radiation or brachytherapy:** Directs radiation next to or inside the tumor.
- **Radiopharmaceuticals:** Comes in the form of pills, injection, or insertion into a body cavity.



Linear Accelerator

### Who are my radiation team members?

- **Radiation oncologist:** Directs care while you are getting radiation treatment.
- **Radiation oncology nurse:** Guides you through treatment and helps manage side effects.
- **Radiation therapist:** Administers radiation therapy treatment.
- **Dosimetrist:** Designs radiation treatment plan.
- **Radiation physicist:** Verifies the safety of the radiation treatment plan.
- **Scheduler:** Coordinates appointments.

(Continued)

# Radiation Therapy (continued)

## What can I expect during treatment?

The machines used for radiation treatment are very large and can move around your body. You will:

- Lie on a table and be positioned the same way for each treatment.
- Be able to hear and talk to the therapist while receiving treatment.
- See and hear the movement of the machines (“whirring” or “clicking” noise).
- Not be able to feel the radiation.



## How do I stay safe with radiation therapy?

- Follow the safety instructions provided by your health care team
- Limit your exposure to other types of radiation



Scan the QR code for a list of recommended questions to ask your health care team.

## Questions for my health care team

| Types of Radiation                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|--------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| External beam radiation therapy            | Requires no radiation source inside your body, so you are not radioactive at any time during or after treatment.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| Internal radiation therapy (brachytherapy) | Your body may briefly give off a small amount of radiation at or near the site of treatment. It’s unlikely that others could be exposed to radiation, but you may be asked to stay in the hospital, limit visitors during treatment, and stay distanced from others. Pregnant women and children may not be allowed to visit you.                                                                                                                                                                                                                                                                                                      |
| Radioembolization                          | The radiation source stays near the tumor and travels a short distance, targeting mostly just the tumor. You may have to limit contact with others for a week after treatment and avoid close contact with children and pregnant women.                                                                                                                                                                                                                                                                                                                                                                                                |
| Oral or systemic radiation treatment       | Some radiation may linger in your system after treatment and may leave your body through saliva, sweat, blood and urine: <ul style="list-style-type: none"><li>• Wash your laundry separately, including sheets and towels</li><li>• When using the toilet, sit down to avoid splashing body waste, flush twice, and wash hands well</li><li>• Use separate utensils and towels</li><li>• Drink fluids to flush out the radioactive material</li><li>• Stay distanced from people, especially children, pregnant women, and pets</li><li>• Stay home and avoid kissing, sexual contact, and other high-exposure environments</li></ul> |

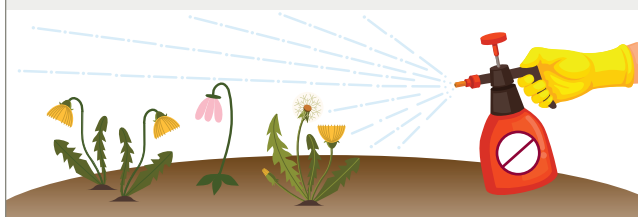
# Chemotherapy

## What is chemotherapy

Chemotherapy is a type of systemic treatment used to treat cancer.

It can be given in different forms (medication given through your vein or as an IV, as a tablet or capsule, an injection, or cream) and can be made up of a single drug or combination of drugs.

You might hear it called "chemo".



*Chemotherapy is like spraying weed killer on a garden. It may not kill all the weeds and it may also harm good plants.*

Below are the different ways chemotherapy is given. Speak with your health care team to learn what's right for you.

**Scan to learn more about chemotherapy**

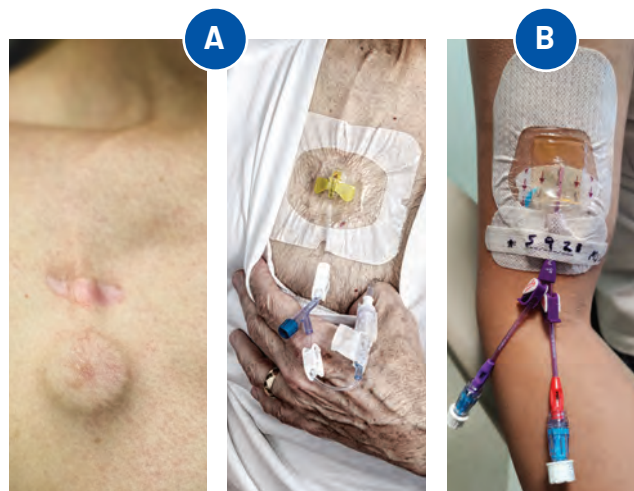


Figure A, Implanted Port

Figure B, Peripherally Inserted Central Catheter (PICC)

**\*\*Occasionally, a peripheral IV (small, short plastic catheter that is placed through the skin into a vein) is used.**

## My Port

My port was placed by Dr. \_\_\_\_\_ on \_\_\_\_/\_\_\_\_/\_\_\_\_ at \_\_\_\_:\_\_\_\_

☐ I have a power port.

My chemotherapy plan is: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

(Continued)

## Frequently Asked Questions About Chemotherapy



### If bringing your own food or beverage:

- We may not be able to store your food for you.
- Let your health care team know about any food or drink allergies.
- Changes in food preferences and sensitivities may occur during treatment. Visit page D-44 or speak with your health care team for more nutrition information.



### Where do I receive treatment?

Chemotherapy can be given in-hospital (inpatient) or at the treatment center (outpatient).



### Will treatment affect my meds?

- Unless your health care team has told you otherwise, you can take your normal daily meds as prescribed.
- You may be given meds that make you sleepy and unable to drive after treatment. Speak with your nurse or social worker if you require transportation.



### How often do I have to get chemo?

Your health care team will talk with you about your treatment schedule. Additional testing, such as labs or imaging, may be recommended prior to your treatment.



### What should I wear to treatment?

- Dress in layers and wear any top (e.g., V-neck or button down top) that allows easy access to your chest if you have an implanted port.
- If receiving inpatient treatment, you will be given a hospital gown to wear.
- Wear comfortable shoes. Avoid open-toe sandals or heels that may pose a hazard.



### What should I expect at my first treatment?

- For your first visit, plan for extra time. Bring a book or electronic to help pass the time.
- Speak with your health care team first if you would like to bring someone with you to treatment. Visitor policies subject to change.
- You may be sitting in a recliner during treatment. If receiving inpatient treatment, your health care team will arrange a hospital bed for you.



### What are the side effects of chemotherapy and how can I manage them?

Side effects will vary. Visit pages E-51 – E-66 for more information or speak with your health care team. Tell your health care team about any symptoms or changes while in treatment.

## Chemotherapy (continued)

### Vascular Port Implantation: What You Need to Know

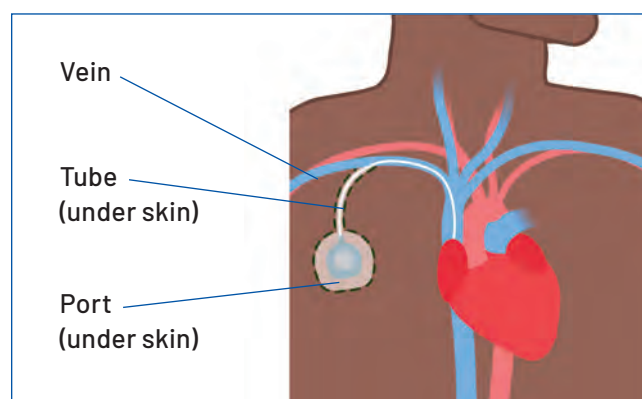
#### What is it?

Port implantation involves surgery to place a port beneath the skin of your chest, into a vein for vascular access. When the port is in use, a special needle passes through your skin and into the port. The port itself can stay implanted for weeks to months. Regular port flushes are necessary for maintenance for as long as you have a port even after treatment. Speak to your health care team for more information on port care and if a port is right for you.

#### What is it used for?

The port helps to deliver cancer-fighting medicines directly to your blood, such as:

- Chemotherapy
- IV treatments
- Hemodialysis for kidney failure



*Scan for more information.*

### Signs of Infection: When to consult your health care team

After implantation, speak with your health care provider right away if you experience:

- Chills
- 100.4° F (34° C) fever or higher
- Swelling, redness, or bleeding around the port
- Numbness, weakness, or tingling in the shoulder or arm of the port side
- Racing heartbeat
- Cough or shortness of breath

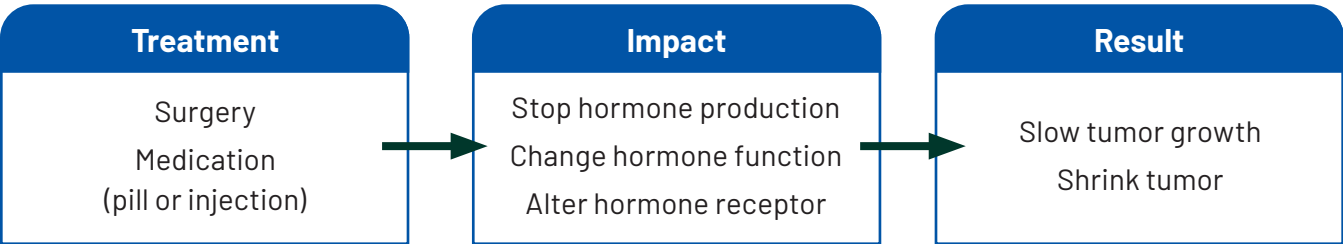
### Common Side Effects of Chemotherapy

- |                |                          |
|----------------|--------------------------|
| • Bleeding     | • Hair loss              |
| • Blood Clots  | • Infection              |
| • Bruising     | • Nail/Skin change       |
| • Constipation | • Nausea and vomiting    |
| • Diarrhea     | • Problems with memory   |
| • Fatigue      | • Sensitivity to the sun |

For more information about side effects and symptoms of cancer treatment, speak with your health care team, or visit the Self Care section of this binder. You may receive more information about your chemotherapy medications from your health care team.

# Hormone Therapy

In some cases, naturally occurring hormones can help some types of cancer cells to grow. Hormones targeted include estrogen, progesterone, and androgens. Hormone therapy is the process of blocking or stopping these hormones from stimulating cancer cells. It is often used in addition to other forms of cancer treatment.



Imagine the hormone is a **key** and the hormone receptor is a **lock**.  
Surgery acts to remove the source of the hormone (or key).



**Hormones targeted by this therapy:**



- Estrogen
- Progesterone
- Androgens

*Scan here for more information.*

**Medications can:**

- Remove the hormone from the system
- Change the hormone or receptor so they no longer function together
- Act to bind and block the hormone receptor

**Medication I will be taking:**

Other notes:

(Continued)

## Hormone Therapy (continued)

### Things to Remember

- ☐ Compliance is key.
- ☐ While certain side effects are expected, report your symptoms early so your health care team can help you manage them.
- ☐ Some side effects can be intense. Your health care team is here to support you and offer solutions.
- ☐ Do not stop your medication without consulting your health care team first.
- ☐ Plan for your medication refills to avoid gaps in your treatment.
- ☐ Keep this medication separate from other medicines.
- ☐ Keep your medication and supplement list current.
- ☐ Let your health care team know if you are taking the following supplements:
  - Black Cohosh
  - Ginseng Supplements
  - Red Clover
  - St. John's Wort

## Immunotherapy

Immunotherapy is a type of treatment that uses the body's own immune system to fight cancer and other diseases. Immunotherapy works to boost the immune system so it can easily find and target cancer cells.

Many of the substances found naturally in the immune system can now be reproduced in the lab and used as part of your cancer treatment.

Types of cells in your body that fight and protect you from disease:

- White blood cells can directly attack "invaders." These invaders can be anything from bacteria to cancer cells.
- Other types of cells produce substances such as antibodies, inflammatory mediators, and more of the substances found naturally in the immune system can now be reproduced in the lab and used as part of your cancer treatment.

*(Continued)*

# Immunotherapy (continued)



## Therapy Classes

Immunotherapy medications can be taken orally, topically, or intravenously. The frequency of treatment depends on the cancer type, treatment type, and how your body reacts. Additionally, your doctor may prescribe one or more of the following therapies:

|                                                                                                                                                              |                                                                                                                                                                                                          |                                                                                                                                                                                                             |                                                                                                                                                               |                                                                                                                                                                                                                                  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <div>I</div> <div>Immune Checkpoint Inhibitors (ICI)</div> <div>Help strengthen the immune system and ensure cancer cells are flagged for destruction.</div> | <div>II</div> <div>Monoclonal Antibodies</div> <div>Man-made antibodies used to specifically target substances on cancer cell surfaces and ensure that the immune system stays “on” and activated.</div> | <div>III</div> <div>CAR T-Cell Therapy</div> <div>Modifies fighting T-cells to find and destroy cancer cells which adds a specific receptor to help T-cells monitor, identify, and kill cancer cells.</div> | <div>IV</div> <div>Oncolytic Viral Immunotherapy</div> <div>Directly kills cancer cells by introducing specific viruses that assist in killing cancers.</div> | <div>V</div> <div>Cancer Vaccines</div> <div>Special vaccines that activate the immune system against already present cancer cells and help to create immunological memory for future immune attacks against cancer cells.</div> |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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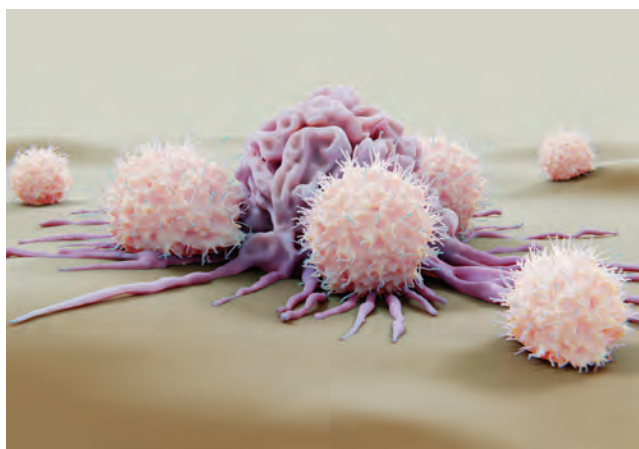
## Immunotherapy (continued)

### Side Effects of Immunotherapy

Patients often tolerate immunotherapy with little to no side effects. Sometimes these medications can cause unusual autoimmune side effects called “immune related adverse events” (irAE).

These side effects:

- Can happen at any time and can start months or years into treatment
- Are unpredictable in who they affect and their severity
- Can mimic other medical problems



Many side effects are possible and can be treated with medication. Some potential side effects include:

- Inflammation of the:
  - Pituitary or adrenal glands
  - Thyroid glands
  - Skin (rashes, itching, blistering, sores)
  - Lungs ('pneumonitis')
  - Gut
  - Liver (hepatitis)
  - Heart
  - Brain and nerves
- 'Type 1' autoimmune diabetes
- Abnormal heartbeat
- Joint problems (arthritis)
- Vision and eye problems
- Blood problems



[Scan here for more information.](#)

**It is very important that you call your oncology provider if you develop any new or worsening signs or symptoms of immunotherapy side effects. If symptoms are severe/ emergent, seek immediate medical care. Side effects can often be treated with medication.**

You should carry a wallet card or medical bracelet with you, notifying medical providers of your immunotherapy treatment. It is very important that you let your health care team know about your treatment with any new medical problems. *Please see the back of this binder for your own wallet card.*

A member of your health care team should provide you with a patient handout with additional information about your medication and possible side effects. Please let your clinic know if you have not received this information.

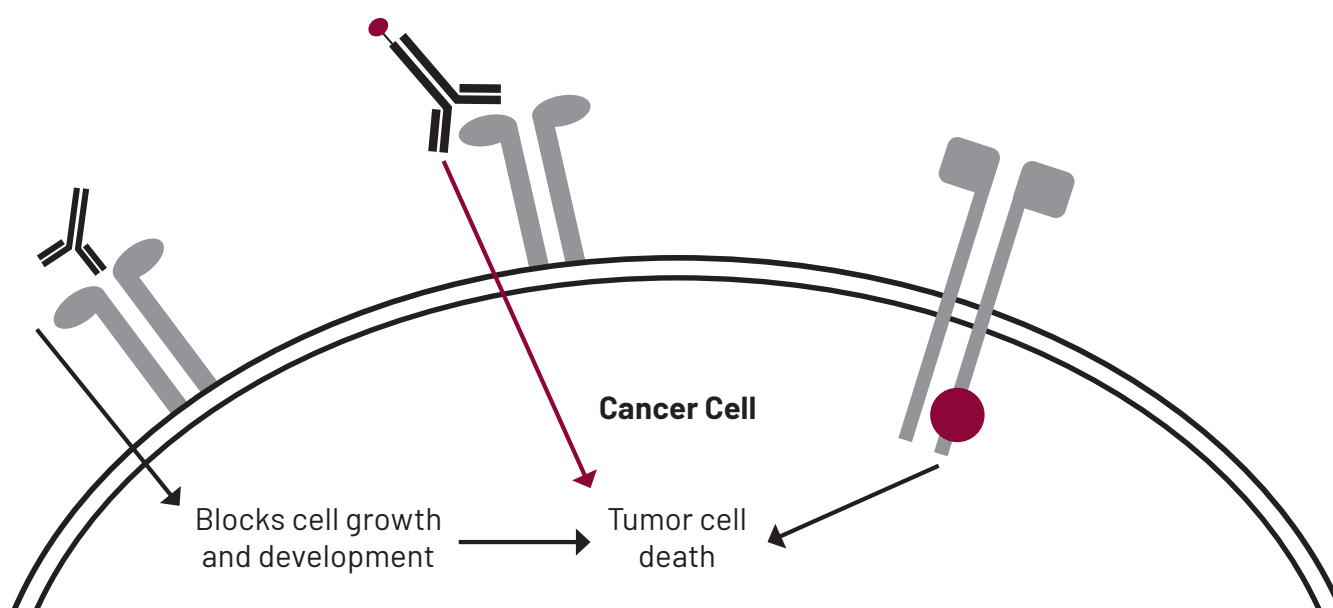
If you have any questions, please contact your health care team.

# Targeted Therapy

Targeted therapy is a form of cancer treatment that uses information obtained through the DNA of cancer cells to determine if specific medications can be used to treat it. It is not available for all types of cancer.

Your doctor may test your blood and/or the tumor biopsy specimen to gather this information. See page D-25 to learn more about DNA testing.

These treatments target specific changes or mutations in a cancer cell's genetic material.



*Image inspired by American Family Physician*

## How does targeted therapy work?

Targeted therapy drugs bind to certain chemicals in the cancer cell, disrupting the cell's ability to survive. This causes cancer cells to die. Targeted therapy can be given orally or via IV.

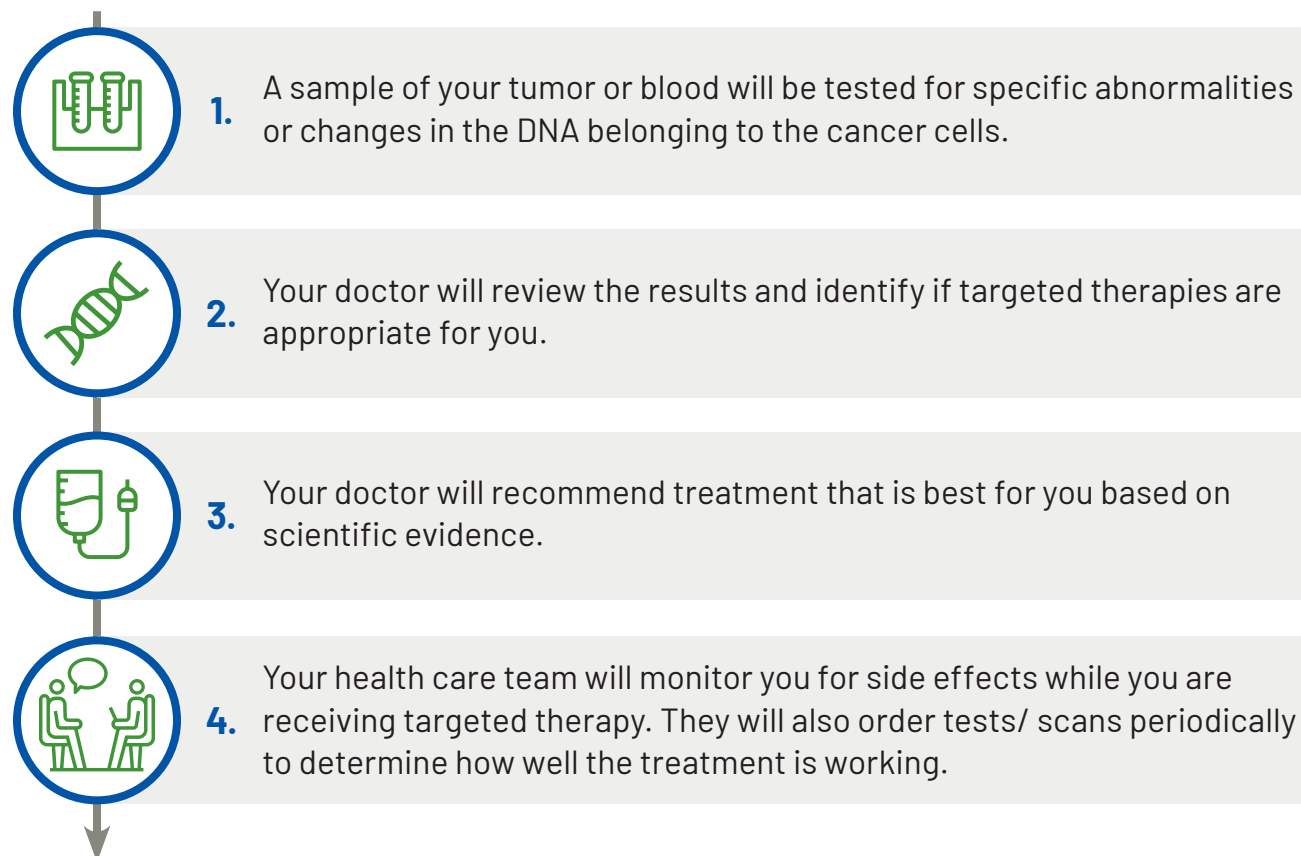


**Scan for more information.**

*(Continued)*

## Targeted Therapy (continued)

### Targeted Therapy Workflow



### Side effects of targeted therapy

Side effects of targeted therapy can vary depending on the drug that is given. Some common side effects of targeted therapy include:

- Skin, hair, and nail changes
- Problems with blood clotting
- Fatigue
- Problems with wound healing
- High blood pressure
- Swelling in the face, feet, and legs
- Inflammation of liver and lungs

In general, targeted therapies are relatively better tolerated compared to chemotherapy.

Talk to your health care team about any side effects and questions you may have.

# Stem Cell Transplant

## What are stem cells?

Stem cells are immature cells that grow and divide into different types of blood cells based on the specific needs of the body. While other cells have a limited lifespan, a stem cell can reproduce forever.

## Where do transplantation stem cells come from?

A medication, **Granulocyte Colony Stimulating Factor (G-CSF)**, is used to pull stem cells out of the bone marrow and into the blood stream. This is also known as “stem cell mobilization.” This medication is a daily injection that must be given for many days before and during stem cell collection.

G-CSF can be administered:

- Alone
- In combination with chemotherapy
- In combination with a medication called Mozobil

## When are stem cells collected?

Using blood tests, your health care team will monitor the white blood cell and mobilized stem cell counts. When they have increased to a safe level, a series of collections will begin. Your physician may choose to continuously monitor your blood count.

- **G-CSF injections alone:** your stem cell collection will start after 3 to 4 days of injections
- **G-CSF injections in combination with chemotherapy or Mozobil:** the timeline depends on the individual and their treatment plan

## When are stem cell transplants useful?

Some common conditions that may be treated with stem cell transplants include:

- Hodgkin's Lymphoma
- Multiple Myeloma
- Non-Hodgkin's Lymphoma

## What kind of vein access will be required?

- **Apheresis Catheter** – one catheter allows blood to be drawn and returned to you at the same time (pictured below)
- **Peripheral IVs** – 2 peripheral IVs are placed each collection day

An apheresis nurse will evaluate your vein options prior to collection day to see which option is best for you. After placement, the catheter will be monitored for signs and symptoms of infection.



(Continued)

## Stem Cell Transplant (continued)

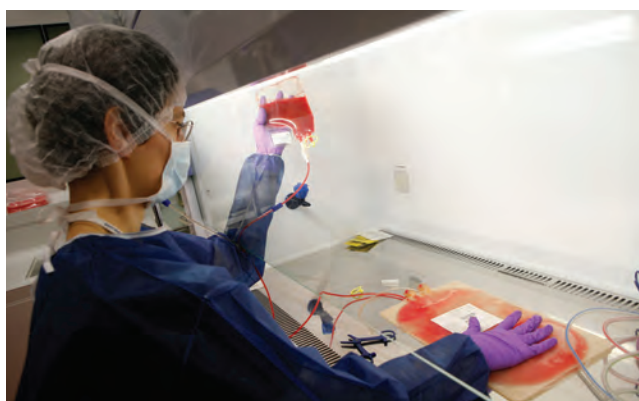
### How are stem cells collected?

Stem cells are collected with an apheresis machine.

The apheresis machine:

- Separates blood into its various parts:
  - White blood cells, red blood cells, platelets, and plasma
- Allows the stem cells to be collected and the rest of the blood to be returned to you.

Collecting stem cells takes approximately four hours. The stem cells may be used right away for bone marrow transplant or stored until needed.



### How many collections are required?

You may need 2-5 collections over a period of multiple days.

### What is collection like?

- Collection will occur while you rest on a bed in the outpatient treatment center.
- Normally you can eat and drink during the collection. Speak with your health care team to advise.
- A trained nurse will care for you throughout the process.
- Speak to your health care team if you would like any visitors to accompany you during this process.

### What are the side effects?

Often, there are very few side effects with stem cell collection. Prior to each day's stem cell collection, your platelet and red blood cell counts will be checked.

Potential side effects include:

- Tingling in your lips or fingers
- Feeling lightheaded or faint
- Fatigue
- Decrease in platelets
- Decrease in red blood cells

You will be monitored and treated for side effects. We recommend having someone drive you home following your treatment.

### How much will it cost?

Stem cell transplants can be expensive. To understand treatment costs, contact your insurance company directly. Federal government programs and local service organizations may also help with costs. If you have any questions, please contact your nurse coordinator or speak with your health insurance provider to see what they cover.

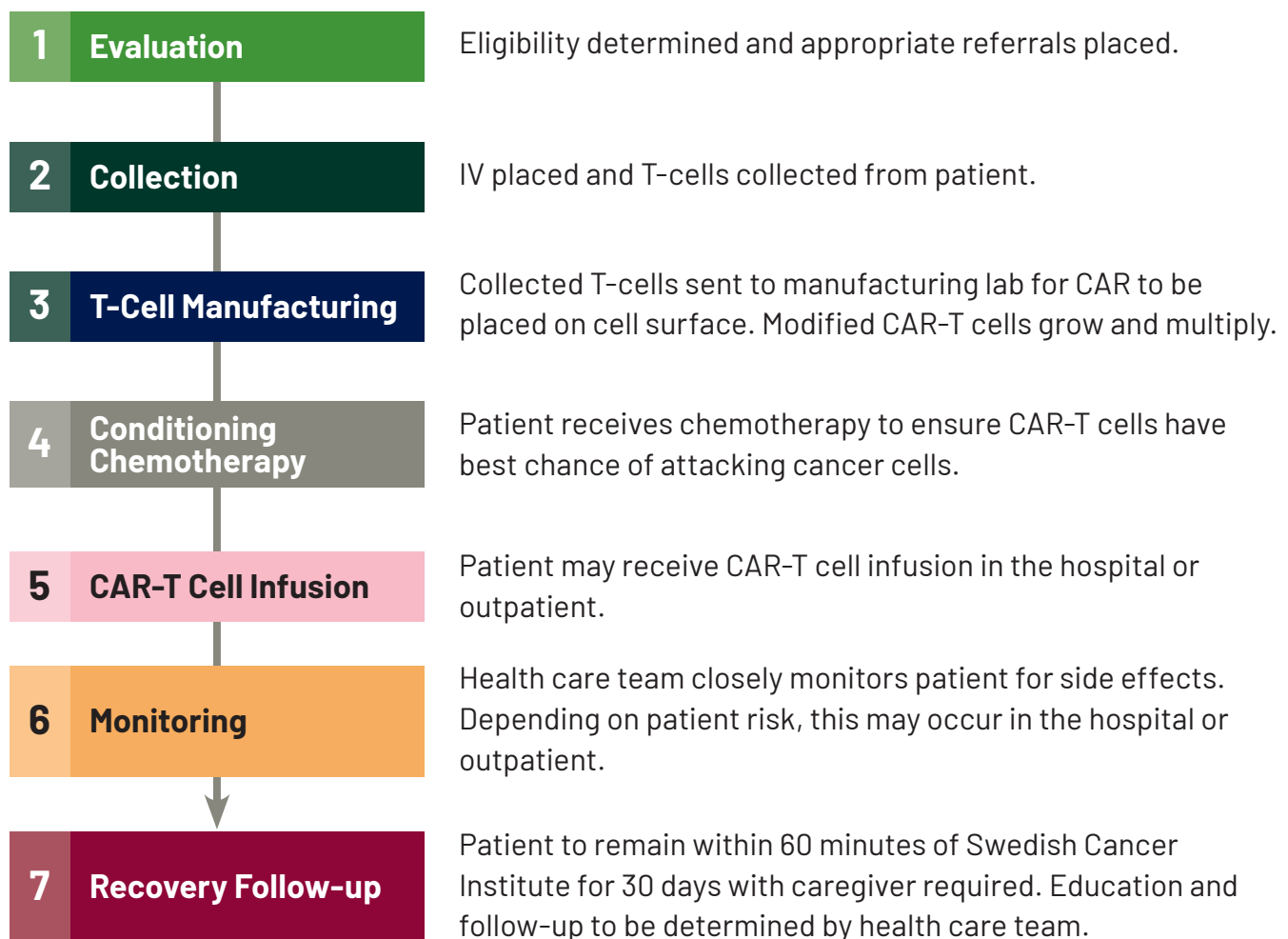


[Scan here for more information.](#)

# CAR-T Cell Therapy

**CAR-T Cell therapy or chimeric antigen receptor (CAR) T-cell therapy is a form of immunotherapy that is used for cancer treatment. T-cells, a form of white blood cell, are collected and changed in the lab by adding a cancer-specific receptor, CAR. CAR presenting T-cells are then given back to the patient.**

## Process



**Speak to your health care team for more information on CAR-T cell therapy.**

*(Continued)*

## CAR-T Cell Therapy (continued)

### How does CAR-T Cell therapy work?

The immune system works by recognizing **self vs. non-self**. In theory, cancer cells should be killed by our immune system, but certain kinds can avoid this function of the immune system and grow uncontrolled. By adding cancer-specific CAR receptors to a patient's T-cells, their immune system can then recognize and kill cancer cells.



[Scan here for more information.](#)

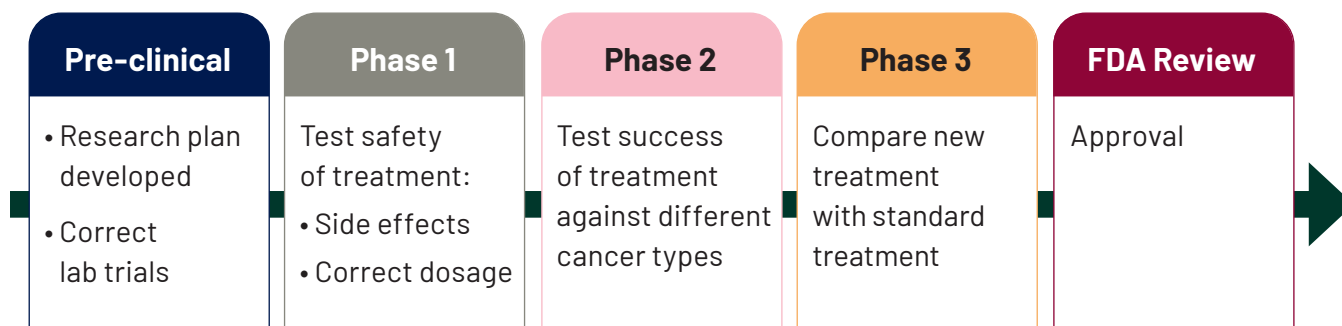
### Side effects may include

- |                        |                                              |
|------------------------|----------------------------------------------|
| • Fever and chills     | • Muscle/ joint pain                         |
| • Difficulty breathing | • Headaches                                  |
| • Nausea               | • Confusion                                  |
| • Lightheadedness      | • Seizures                                   |
| • Increased heart rate | • Slurred speech or difficulty finding words |
| • Fatigue              |                                              |

**If you have concerns or experience any side effects, notify your health care team immediately.**

## Clinical Trials

**As part of your treatment at Swedish Cancer Institute, you may be eligible to participate in a clinical research trial. Swedish Cancer Institute is one of the leading clinical trial sites in Washington state.**



Clinical trials are research studies that test how well new medical approaches work in people and are important for progress in cancer care and treatment.

Your health care team may suggest you participate in a clinical trial. Please discuss any studies that are of interest to you with your doctor.

*(Continued)*

## Clinical Trials (continued)

### Each study has selection requirements that must be met:

- Age
- Type and stage of cancer
- Treatment response
- Specific test results
- Willingness to participate in the study

### These studies test:

- Screening
- Prevention
- Cancer detection
- New or more effective treatments
- Symptom management
- Supportive Care



### What do I need to know about participating in a clinical trial?

- You may have additional:
  - Paperwork
  - Doctor's visits
  - Tests
  - Risks
  - Side effects
- You may gain access to a new treatment not yet widely available
- You will have close monitoring and support from your health care team
- The clinical trial may not work for you
- Insurance companies may not pay for any or all of the care



*Scan for a list of questions to ask your health care team when considering a clinical trial.*

### Care in a Clinical Trial

Every clinical trial includes a research health care team that will help you navigate your trial journey **in addition to your clinical health care team**. Both your clinical health care team and research care team are available to answer any questions you may have.

*(Continued)*

## Clinical Trials (continued)

Your research health care team may include:

- **Principal Investigator** – Oncologist or surgeon who is responsible for the conduct, management, and supervision of a research study.
- **Research Coordinator** – Organizes and leads studies with guidance from Principal Investigators. They help with screening possible participants for study eligibility and provide data updates before study results are finalized.
- **Clinical Trial Nurse** – Specializes in holistic care of research participants including the consent process, eligibility assessment, and protocol integrity. They help deliver treatments and supportive care.
- **Innovative Therapeutics Unit Nurse** – Administers medication/treatment and help with safety assessments, monitoring during investigational treatment, and collection of laboratory samples.

### Informed Consent Process

Informed consent ensures that a patient has enough information and understanding before participating in a clinical trial. You will be asked to sign a form before beginning a clinical trial.

- **You have the right** to ask questions at any point of the process
- **You have the right** to stop participating in the trial at any point for any reason



### Costs

Costs may be covered by sponsors and insurance. Before taking part in a clinical trial, discuss costs and coverage with your insurance and research team.

- Sponsors (pharmaceutical or biotechnology companies): pay for the cost of the experimental aspects of your treatment along with other requirements of the study
- “Routine care costs”: (i.e., doctor visits, hospital stays, lab work, imaging, etc.) often covered by private insurance or Medicare

Learn more about ongoing clinical trials at [clinicaltrials.gov](https://clinicaltrials.gov) and those offered at SCl on the Swedish Cancer Institute website. You may also contact the Research Department directly at [cancerresearch@swedish.org](mailto:cancerresearch@swedish.org).



**Scan the QR Code for a list of current national clinical trials.**

# Nutrition

## Eating well during treatment

Good nutrition is important for everyone, but especially for people with cancer. Your diet may change throughout your cancer journey.

## Why is nutrition important?

- Maintain your strength and energy
- Maintain a healthy weight
- Reduce side effects from treatment
- Lower your risk of infection
- Faster healing and recovery



Swedish Cancer Institute offers one-on-one appointments with a registered dietitian for those who are in treatment, free-of-charge. A dietitian can provide nutrition resources to meet your needs before, during, and after treatment. Dietitians may have additional information on weight management resources for patients in follow-up.

For more information or to schedule a nutrition appointment, please call **206-215-6213**.

## Healthy eating tips

- Eat protein with each meal and snack  
*Examples:* fish, poultry, lean red meat, eggs, low-fat dairy products, nuts and nut butters, dried beans, peas and lentils, and whole soy foods (e.g., edamame, soy, nuts, tempeh and tofu)
- Try not to wait until you are hungry to eat; snack throughout the day  
*Examples:* Half of a sandwich, hearty soup, milk and cereal, cheese and crackers, and yogurt.
- Eat your largest meal when you feel the hungriest
- A liquid meal replacement can be a good source of calories and protein for meals and snacks
- Drink plenty of fluids during the day, especially if you are vomiting, having diarrhea, or eating less than normal  
*Examples:* water, broth, juice, tea, jell-o, etc.
- Light exercise may increase your appetite

## Nutritional supplements and vitamins & minerals

- Please discuss the safety of taking vitamins, minerals, and/or herbal supplements with your health care team
  - Large doses may be harmful and may interfere with treatment



*Scan for more information  
about nutrition.*

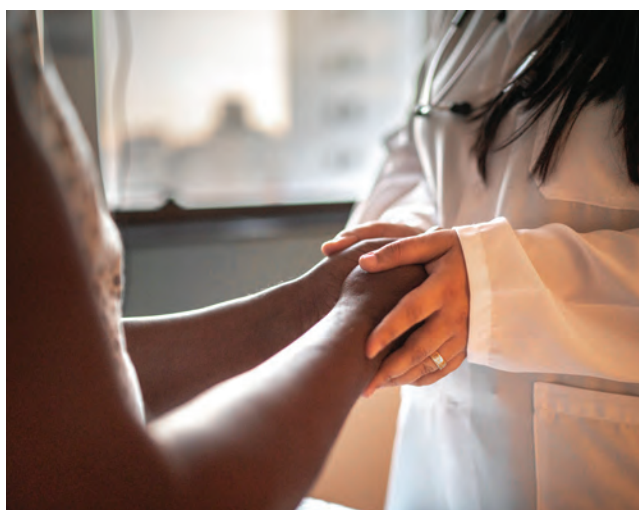
# Cancer Rehabilitation Medicine

At Swedish Cancer Institute, we understand your cancer diagnosis can impact everyday life in many ways. Our Cancer Rehabilitation Medicine services help patients manage side effects of cancer before, during, and after treatment. Our licensed physicians and therapists work with each patient to assess their needs and develop a customized treatment plan. Each plan is personalized, with the goal of providing whole-person care and improving overall health and well-being. Patients can be referred from their primary health care team or other specialized care.

## Is Cancer Rehabilitation right for you?

Do you have:

- Fatigue or low energy that interfere with your daily routines?
- Scarring, swelling, or pain from cancer treatment?
- Limited range of motion?
- Difficulty balancing? Falls?
- Joint pain from cancer treatment?
- Swelling?
- New changes in your sleep or mood?



## Cancer Rehabilitation assists in:

- Treating the side effects of cancer, including side effects from several cancer therapies
- Improved physical function and range of motion
- Medication management
- Building a higher tolerance for everyday activities
- Medical acupuncture for dry mouth, hot flashes
- Prehabilitation (*training for treatment before it happens*)
- Survivorship care for navigating life during and after treatment



**Scan for information on Cancer Rehabilitation Services or call 206-215-6333.**

# Palliative Care and Symptom Management Clinic

**Palliative care is one way to improve care and quality of life for patients who have a serious or life-threatening disease.**

## **Palliative care assists in:**

- Addressing the psychological, social, and spiritual aspects of care
- Providing relief from pain and other distressing symptoms
- Preventing or treating the symptoms and side effects of the disease and its treatment
- Making difficult medical decisions
- Ensuring as much comfort and physical activity as possible
- Tailoring care and support for each individual

## **Is palliative care right for you?**

Do you have:

- Pain that is not treated to your satisfaction?
- Nausea and fatigue?
- Depression and/or anxiety?
- A prognosis of your disease that you do not understand?
- Difficult medical decisions you need help navigating?



## **Managing Symptoms**

We help patients and their families manage many challenges, including:

### **Physical:**

- Pain, fatigue, loss of appetite, nausea, vomiting, shortness of breath, and trouble sleeping

### **Emotional and coping:**

- Providing resources to help patients and families process emotions
- Helping with depression, anxiety, and fear

### **Practical:**

- Helping with finance and legal worries, insurance questions, employment issues, and completing advance directives

### **Spiritual:**

- Exploring beliefs and values

*(Continued)*

## Palliative Care and Symptom Management Clinic (Continued)

### Palliative Care vs. Hospice Care: What's the difference?

Palliative care and hospice care are often confused to mean the same thing. However, they differ in many important ways, including who receives it, where it is provided, and how your insurance may cover it.



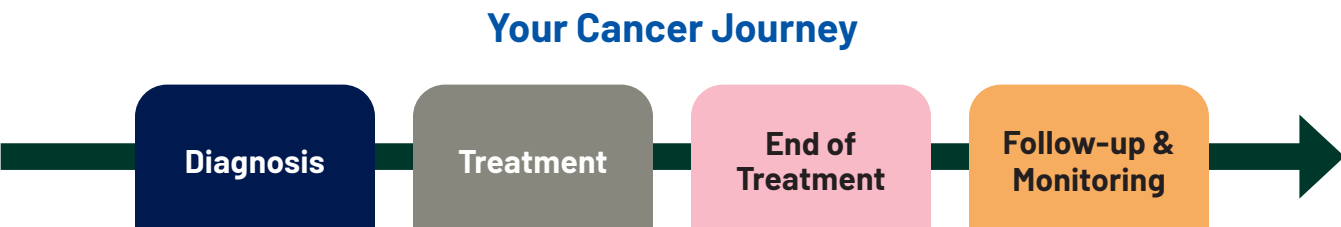
*For more information, dial  
206-386-2126, or speak with  
your health care team to discuss  
which care may be right for you.*

| PALLIATIVE CARE                                                                                               | HOSPICE CARE                                                                                                  |
|---------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| Offered for anyone with a serious illness, no matter how long they are expected to live.                      | Offered for anyone with a terminal illness, with less than six months left to live.                           |
| Provided alongside other standard cancer treatments.                                                          | Aimed mostly at relieving or controlling pain and symptoms.                                                   |
| Provided in hospitals, outpatient clinics, doctors' offices, homes, and long-term care facilities.            | Provided in hospitals, patient homes, long-term care, and private hospice facilities.                         |
| Health care team consists of doctors, nurses, social workers, clergy and spiritual advisors, and pharmacists. | Health care team consists of doctors, nurses, social workers, clergy and spiritual advisors, and pharmacists. |
| Covered all or in part by many health insurance plans, including Medicare and Medicaid.                       | Covered by Medicare and Medicaid, Department of Veterans Affairs, and most private insurance plans.           |
| Obtained through a referral by your doctor.                                                                   | Obtained through your doctor or hospital discharge planner.                                                   |

# Survivorship

At Swedish Cancer Institute (SCI), we recognize that your cancer care journey evolves over time. Our goal, beginning at the time of diagnosis, is to create a personalized plan of care to address your changing needs from diagnosis to follow-up after treatment.

Swedish provides patients receiving cancer treatment with survivorship resources aimed at improving overall health and quality of life. In partnership with your health care team, the Survivorship Program will work with you and your family to help you prepare, manage, and thrive as you receive your care at Swedish. The program is designed to be an added resource bridging the gap between your cancer care and primary care provider.



*(Continued)*

## Survivorship (continued)

Below are some of the ongoing needs that our Survivorship Program addresses:



At Swedish, we recognize that your needs change from the time of diagnosis and beyond. That is why our Survivorship Program offers numerous resources that will benefit you throughout your journey. The Survivorship Program will work with your health care team to support and equip you with the following survivorship resources, personalized to your changing needs.

**For more information about survivorship resources, speak with your health care team or call our Cancer Education Center at 206-386-3200.**

### Survivorship Resources

- |                           |                          |
|---------------------------|--------------------------|
| • Cancer Rehabilitation   | • Speech Therapy         |
| • Lymphedema Treatment    | • Acupuncture            |
| • Cancer Education Center | • Psychiatry             |
| • Physical Therapy        | • Fertility Preservation |
| • Nutrition               | • Support Groups         |
| • Occupational Therapy    | • Menopause Gynecology   |
| • Massage                 | • Art and Music Therapy  |



# Symptoms



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# Anemia

Cancer treatment can cause a drop in blood cell levels. Depending on the type of blood cell affected, you may experience different symptoms.

Anemia, or low red blood cells (RBC), means that your blood has a lower-than-normal amount of oxygen. It can range in severity.

## What You Need to Know

### What causes anemia?

- Cancer itself
- Cancer treatment
- Blood loss
- Lacking certain vitamins or minerals in your diet
  - Low iron levels
- Major organ problems or diseases

### What are the symptoms?

- Fast heart and breathing rate
- Exertion doing everyday activities
- Dizziness
- Swelling of the hands and/or feet
- Skin, nail beds, or gums that are more pale
- Extreme tiredness
- Bright red or brown vomit
- Bright red, dark red, or black stool

### What can I do?

- Pace activities and rest
- Eat a balanced diet with protein and iron rich foods
- Drink plenty of water



Ask your doctor for recommendations on how to manage anemia based on your treatment plan. Keep track of your symptoms and reach out to your health care team with questions.



Scan this code to learn more.

What medication has your health care team ordered for you?

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NOTES

# Blood Clots

**Cancer treatments can cause a decrease in blood cell levels. Depending on the type of blood cell affected, you may have different symptoms.**

**Blood clotting is a normal body process used to stop bleeding when injury occurs. With cancer, this can occur in a disordered fashion and can cause blockages in veins and arteries.**

## What You Need to Know

### What causes blood clots?

Blood clots are natural and important to stopping bleeding. Cancer and treatments can increase the risk of blood clots due to tissue damage.

### What are some risk factors?

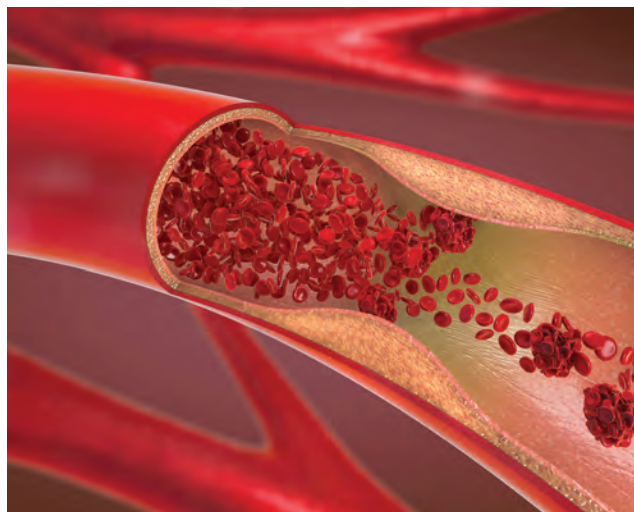
- Cancer and its treatments
- Older age
- Smoking
- Being overweight
- Having a central line in place
- Having surgery
- Having a blood transfusion or having anemia treatment

### What are the symptoms?

- Sudden pain in the chest, leg, or arm
- Swelling in the leg or arm
- Fast heart rate
- Shortness of breath
- Sweating or fever
- Coughing up blood

### What can I do?

- Use compression stockings



*Ask your doctor for recommendations on how to manage blood clots based on your treatment plan. Keep track of your symptoms and reach out to your health care team with questions.*



**Scan this code to learn more.**

**What medication has your health care team ordered for you?**

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## NOTES

# “Chemo brain”

Many people experiencing cancer can have problems with memory, often known as “chemo brain.” This may mean reduced memory, concentration, and ability to learn new things. For some, these tasks simply require more mental effort.

“Chemo brain” can occur at any point during the cancer journey and can last for varying amounts of time.

## What You Need to Know

### “Chemo brain” can cause you to

- Forget details and common words
- Feel mental “cloudiness”
- Struggle to learn new tasks
- Have poor concentration

### What causes it?

- Cancer and its treatments
- Surgery
- Age
- Hormone changes
- Nutritional deficiencies

### What can I do?

- Exercise
- Meditate
- Eat vegetables and avoid alcohol
- Set routines
- Use a planner and set reminders
- Get enough sleep



Ask your doctor for recommendations on how to manage “Chemo brain” based on your treatment plan. Keep track of your symptoms and reach out to your health care team with questions.



Scan this code to learn more.

What medication has your health care team ordered for you?

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NOTES

# Constipation

**Constipation occurs when your bowels move less often than normal or when your stool becomes hard and difficult to pass.**

## What You Need to Know

### What causes constipation?

- Not enough fluid and/ or movement in your intestine
- Not enough physical activity
- Food changes
- Dehydration
- Pain medicine, especially opioids
- Some cancer treatments

### What happens?

- Small, hard bowel movements
- Leakage of soft, liquid stool that looks like diarrhea
- Stomach ache or cramps
- Excessive gas and/ or belching
- Bloating of the abdomen

### What can I do?

- Drinking more fluids
- Exercise
- Avoid foods and drinks that cause gas

### Other tips?

- Keep a record of your bowel movements
- Keep a food log
- Talk to your doctor about taking medicine to treat constipation



*Ask your doctor for recommendations on how to manage constipation based on your treatment plan. Keep track of your symptoms and reach out to your health care team with questions.*



**Scan this code to learn more.**

**What medication has your health care team ordered for you?**

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### NOTES

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# Diarrhea

Diarrhea is the passage of loose or watery stools several times a day and more often than is normal for you. You may have cramps or stomach pain and may need to get to the bathroom right away.

Uncontrolled diarrhea can lead to weight loss, fluid loss, poor appetite, and weakness.

## What You Need to Know

**Diarrhea can be caused by:**

- Cancer treatment
- Infection
- Some medicines
- Tumor growth
- Surgery
- Stress
- Eating foods that don't agree with you

Can start within hours, days, or weeks after receiving treatment and can last weeks or months after it ends.

If left untreated, it can lead to dehydration and malnutrition.

**Things you can do to help manage diarrhea:**

- Eat a clear liquid diet, salty foods, high-potassium foods, and small portions throughout the day
- Do not eat or drink things that are hot or spicy, high-fiber, or high-fat
- Do not drink acidic beverages or those with alcohol or caffeine
- Avoid sugary and rich desserts
- Do not use tobacco or sugar-free gum



**Other tips**

- Keep a record of your bowel movements to help decide when to call the doctor
- Talk to your doctor about taking medicine to treat diarrhea

Ask your doctor for recommendations on how to manage diarrhea based on your treatment plan. Keep track of your symptoms and reach out to your health care team with questions.



Scan this code to learn more.

What medication has your health care team ordered for you?

NOTES

# Dry Skin and Color Changes

**While undergoing cancer treatment, a variety of skin changes may occur, such as dry skin and changes in skin color.**

**Skin changes often happen with increased sun sensitivity.**

## What You Need to Know

### What causes skin changes?

- Dryness: side effect of treatment, dehydration, heat/ cold, and/or poor nutrition
- Color: side effect of treatment, tumor growth, sun exposure

### What are some signs & symptoms?

- Dryness:
  - Redness
  - Flakiness
  - Cracks (sometimes with slight bleeding)
- Color:
  - Yellowish skin and/or whites of eyes
  - Bruises or areas of blue/ purple skin
  - Pale or blue tinged skin (often with trouble breathing)
  - Redness or rash
  - Swelling

### What can I do?

- Keep clean using gentle skin products
- Keep moisturized
- Protect skin from heat, cold, and sun
  - Apply broad spectrum sunscreen
- Wear loose, soft clothing
- Stay hydrated



*Ask your doctor for recommendations on how to manage dry skin based on your treatment plan. Keep track of your symptoms and reach out to your health care team with questions.*



**Scan this code to learn more.**

**What medication has your health care team ordered for you?**

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### NOTES

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# Fatigue

**Fatigue is an extreme feeling of tiredness, weakness, or lack of energy. You may feel too tired to eat, walk to the bathroom, or even use the TV remote.**

**Fatigue is very common for those experiencing cancer and may be a side effect of treatment or of cancer itself.**

## What You Need to Know

### What causes fatigue?

- Recovering from surgery
- Low blood counts
- Low electrolyte levels
- Infection
- Changes in hormone levels
- A combination of factors

### How long will it last?

- Fatigue can:
  - Last throughout treatment and often continues after treatment ends
  - Differ from one day to the next

### Fatigue can make it hard:

- For you to feel well
- For you to be with friends and family
- To do things you normally do
- To follow your cancer treatment plan

### What can I do?

- Exercise
- Massage therapy
- Counseling
- Dietary or nutrition changes



*Ask your doctor for recommendations on how to manage fatigue based on your treatment plan. Keep track of your symptoms and reach out to your health care team with questions.*



**Scan this code to learn more.**

## What medication has your health care team ordered for you?

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NOTES

# Hair Loss

**Some cancer treatments can cause you to lose some or all of your hair. It usually happens while washing your hair or brushing and may come out in clumps.**

## What You Need to Know

### How will it happen?

- Treatment can damage hair follicles, causing hair to fall out
- Treatment drugs can affect hair thickness/loss differently
- Typically starts within 1-3 weeks of treatment
- \*Hair often starts to grow back even before treatment ends\*

### How can I prepare?

- Ask your health care team if and when hair loss will happen
- You can:
  - Choose to cut your hair short or shave your head
  - Discuss a cooling cap
  - Explore wigs, hats, turbans, and scarves

### Other tips:

- Wigs and other scalp coverings may be covered by your health insurance
- Protect the skin on your scalp from heat, cold, and the sun
- Be gentle when brushing or washing your hair and scalp
- Use a hair net at night or sleep on a satin pillowcase
- Be gentle with eyebrows and eyelashes
- New hair growth may have different texture, color, and thickness



Ask your doctor for recommendations on how to manage hair loss based on your treatment plan. Keep track of your symptoms and reach out to your health care team with questions.



Scan this code to learn more.

**What medication has your health care team ordered for you?**

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### NOTES

# Itching and Skin Rashes

**While undergoing cancer treatment, a variety of skin changes may occur including itching and skin rashes.**

**Skin changes often are accompanied by increased sun sensitivity.**

## What You Need to Know

## What causes itching and skin rashes?

- Skin Rashes: side effect of cancer treatments
  - If this develops suddenly after treatment or taking a medication, this could be a sign of an allergy
- Itching: side effect of cancer and its treatments, medications, and other health conditions

## What are the symptoms?

- Skin rashes:
  - Changes in texture on the scalp, face, neck, chest, upper back etc.
  - Redness, swelling, itching, burning, pain and tingling
- Itching:
  - Dry, red, rough skin
  - Sores, rash, or bumps

## What can I do?

- Skin rashes:
  - Clean skin with gentle cleansers, pat dry
  - Keep skin moisturized
  - Protect affected area from heat, cold, and sun. Use broad-spectrum sunscreen
  - Wear loose, soft clothing
- Itching: (same as above)
  - Add baking soda, oatmeal, or bath oil to warm water for bathing
  - Avoid scented skin products
  - Keep body cool to avoid sweating
  - Drink enough water



*Ask your doctor for recommendations on how to manage itching based on your treatment plan. Keep track of your symptoms and reach out to your care team with questions.*



**Scan this code  
to learn more.**

## What medication has your health care team ordered for you?

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## NOTES

# Low Platelet Count

**Cancer treatment can decrease blood cell levels. Depending on the type of blood cell affected, you may have different symptoms.**

**Platelets are a type of blood cell that are important for blood clotting to help stop active bleeding. When these cells are low, your risk of bleeding is much higher.**

## What You Need to Know

### What causes low platelet counts?

- Certain cancers (leukemia and lymphoma)
- Cancer treatment
- Other health problems or medications

### What are the symptoms?

- Bleeding from mouth, nose, rectum, etc.
- Red or brown toned body fluids: Urine, vomit, spit, and stool
- Heavy vaginal bleeding during menstruation
- Unexplained bruising
- Red pinpoint dots on skin
- Headaches
- Dizziness
- Blurred vision
- General sense of weakness
- Joint and/or muscle pain

### What can I do?

- Protect yourself from cuts, scrapes, falls, and bruises
- Brush teeth with a soft toothbrush
  - If mouth bleeds, rinse it with ice water
- Do not blow your nose or cough with force
- Avoid anti-inflammatory pain medicines unless your health care team tells you to use them



*Ask your doctor for recommendations on how to manage low platelet count. Keep track of your symptoms and reach out to your health care team with questions.*



**Scan this code to learn more.**

## What medication has your health care team ordered for you?

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## NOTES

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# Mouth and Throat Discomfort

Cancer treatment may cause mouth sores, mouth dryness and thick saliva. This can be uncomfortable and can make swallowing more difficult. This can cause dehydration, poor eating, and weight loss.

## What You Need to Know

### What can cause mouth and throat discomfort?

- Some treatments can damage the cells that line the mouth, throat, and digestive tract causing sores
- Some treatments can irritate or damage the glands that make saliva which can:
  - Decrease saliva production
  - Cause thick saliva
  - Cause dry mouth
  - Increase risk of cavities and mouth infections

### What can I do?

- Have a dental check-up before treatment
- Practice good mouth care and use mouth rinse
- Take frequent sips of cold water
- Suck on ice chips before, during and after short chemotherapy infusions
- Use moisturizing lip balm
- Some foods may impact mouth and throat discomfort. Talk to your health care team for food suggestions.

### Talk to your health care team about:

- Nutritional supplements
- Medication you can take to help with mouth sores and dry mouth
- Seeing a speech-language pathologist or a swallowing therapist
- A mouth care-plan that is right for you



Ask your doctor for recommendations on how to manage mouth and throat discomfort. Keep track of your symptoms and reach out to your health care team with questions.



Scan this code to learn more.

### What medication has your health care team ordered for you?

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NOTES

# Nail Changes

**Certain kinds of cancer and cancer treatments can temporarily, or permanently change the nails of our fingers and toes.**

## What You Need to Know

### What causes nail changes?

- Certain cancers
- Cancer medications and treatments

### What kinds of changes occur?

- Dark areas near the cuticle
- Cracks, tears, or deep cuts in the nail
- Red lines in the nail (bleeding)
- Darkening of the skin or nail itself
- Inflammation of the nailbed or the surrounding finger/ toe
  - This can have an associated infection
- Lifting of the nail from the nailbed
- Nail Loss
- Ridges or lines in nail
- Nail growth can stop

### What can I do?

- Monitor nails for changes
- Keep nails trimmed short
- Wear gloves when performing tasks (i.e. gardening, washing dishes)
  - Wear loose fitting shoes
- Do not get professional manicures/ pedicures



*Ask your doctor for recommendations on how to manage nail changes based on your treatment plan. Keep track of your symptoms and reach out to your health care team with questions.*



**Scan this code to learn more.**

## What medication has your health care team ordered for you?

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## NOTES

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# Nausea and Vomiting

**Nausea and vomiting are two of the most common side effects from cancer treatment and are often preventable. Not every patient gets sick from cancer treatment, but if you do, it's important to manage it as much as possible.**

## What You Need to Know

### When does it occur?

- Anytime after treatment

### What are the risks?

- Poor appetite
- Dehydration
- Loss of vitamins and electrolytes
- Fatigue and low energy
- Reduced concentration
- Slow wound healing
- Esophagus irritation and in more serious cases, tearing
- Canceled or delayed treatment

### What can I do?

- Prevent by avoiding trigger foods and smells
- Hydrate
- Discuss complimentary therapies with your health care team:
  - Acupuncture
  - Behavioral therapy
  - Relaxation techniques



*Ask your doctor for recommendations on how to manage nausea and vomiting based on your treatment plan. Keep track of your symptoms and reach out to your health care team with questions.*



**Scan this code to learn more.**

## What medication has your health care team ordered for you?

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**NOTES**

# Neutropenia

**Cancer treatments can cause a decrease in blood cell levels. Depending on the type of blood cell affected, you may have different symptoms.**

**Neutropenia, or low white blood cell (WBC), counts can put you at greater risk of infection.**

## What You Need to Know

### What is neutropenia?

- Decreased number of WBC's in bloodstream
- Causes increased risk of infection
  - Fever, pus, swelling, pain, etc.

### What causes it?

- Cancer treatments like:
  - Chemotherapy
  - Radiation
  - Bone marrow/ stem cell transplant
  - Steroids

### What are the symptoms?

- Fever
- Chills
- Mouth sores
- Cough
- Difficulty breathing
- Abdominal or rectal pain

### What can I do?

- Wash your hands frequently
- Wear a mask when appropriate
- Discuss concerns with health care team



Ask your doctor for recommendations on how to manage neutropenia based on your treatment plan. Keep track of your symptoms and reach out to your health care team with questions.



Scan this code to learn more.

**What medication has your health care team ordered for you?**

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### NOTES

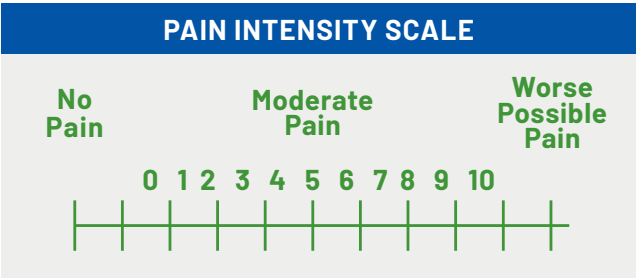
# Pain

We are all familiar with different feelings of pain. Sometimes cancer itself, tests, treatments, and more can cause pain for a person with cancer. Regardless of your diagnosis, pain can and should be managed.

**What You Need to Know**

**What can I do?**

- Take note of your pain and communicate it with your health care team
  - Describe the pain (dull, sharp, etc.)
  - Use a scale to describe your pain
  - Anything that seems to make it better or worse
  - How pain interferes with your daily activities
- Develop a pain management plan with your health care team



Ask your doctor for recommendations on how to manage pain based on your treatment plan. Keep track of your symptoms and reach out to your health care team with questions.



Scan this code to learn more.

**My pain management plan**

Self-Care



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# Young Adults With Cancer

**Young adults with cancer face unique challenges while going through treatment:**

## Self-Image and Sexuality

Self-image, intimacy, and sexual well-being may be impacted by cancer and its treatment.

## Fertility/Having a Child

Cancer and its treatment could affect fertility and cause birth defects. Talk to your health care team about fertility preservation options and how treatment may affect you.



*Scan this code to learn more.*

## Working and Finances

Cancer and its treatment can affect a person's ability to work. Know your rights as an employee with cancer. Discuss how your needs can be accommodated with your employer. Go to page F-77 in this binder for information on financial assistance.

## Social and Emotional Well-being

Being diagnosed with cancer during a time of many life changes can cause stress, anxiety, isolation, loneliness, and other emotions for many reasons.

# LGBTQIA+ Patients at Swedish Cancer Institute

**SCI is committed to providing compassionate, competent, and inclusive cancer care to every patient.**

## **At Swedish Cancer Institute, we have:**

- Tools to reflect your identity in your medical record
- Patient advocacy groups
- LGBTQIA+ staff trainings and internal resources

## **LGBTQIA+ Resources:**

- <https://www.swedish.org/services/transgender-health>
- <https://www.swedish.org/about/dei/lgbtqia-care/resources>
- <https://www.lgbtcancer.org/>
- <https://cancer-network.org/>
- <https://www.hrc.org/resources/patient-resources>

Your cancer health care team is here to support and advocate for you. Please communicate any questions or concerns you may have.

For assistance navigating care as a transgender or gender diverse person, please call **253-231-0888, 866-366-0926**, or email **[transhealthnav@swedish.org](mailto:transhealthnav@swedish.org)**.



**Please see “Getting Started” on page B-3 and “What You Need to Know” on page B-5 for more information on your appointments at SCI.**

# Appearance and Body

**One of the many challenges with cancer treatment can be getting used to a body that cancer has changed. How your body looks and functions may be different and unfamiliar. Below is a list of appearance and body resources in the area.**

**ABCD: After Breast Cancer Diagnosis**

[Abcdbreastcancersupport.org](http://Abcdbreastcancersupport.org)

Toll-free **1-800-977-4211**

**Cancer Lifeline**

Changing Bodies Workshop

[cancerlifeline.org/classes](http://cancerlifeline.org/classes)

**206-297-2500**

**Citrine Health**

2940 W. Marine View Drive

Everett, WA 98201

**425-259-9899**

**Hanger Clinic**

1101 Madison St., Suite 550

Seattle, WA 98104

**206-323-4040**

**Judy's Intimate Apparel**

4538 S. Pine St.

Tacoma, WA 98409

**253-474-4404**

**Mary Catherine's**

Oak Tree Village

10002 Aurora Ave. N.

Seattle, WA 98133

**206-322-1128**

**Nordstrom Lingerie Department**

**Seattle:**

500 Pine St.

Seattle, WA 98101

**206-628-2111**

**Tacoma:**

4502 S. Steele St.

Tacoma, WA 98409

**206-475-3630**

**Tukwila:**

100 Southcenter Mall

Tukwila, WA 98188

**206-246-0400**

**TLC Catalog**

(through the American Cancer Society)

This catalog includes hats, turbans, hairpieces and bras for patients with cancer.

**Tlcdirect.org**

Toll free **1-800-ACS-2345 (1-800-227-2345)**

# Keeping You and Your Loved Ones Safe During Treatment

**It is important to keep you and your loved ones safe throughout your treatment. There are many things that can help keep you on the best path to healing.**

**Please contact your health care team to assist you with any of your concerns.**



## Medication Safety

- Wash hands before and after handling chemo needles.
- Take medications regularly as prescribed.
- Keep medications in their original bottles and read labels carefully.
- Store medicines away from children, pets, and food.
- Keep a medication log.
- Dispose of medicines properly.
- Be aware of possible medication interactions (i.e. supplements and other medications).
- Do not get pregnant during treatment. Use contraception.
- Contact your health care team with any questions or concerns.

*(Continued)*

## Treatment Safety (continued)



### What to do:

#### To Prevent Infection

- Practice good hand washing.
- Talk to your health care team about vaccinations.
  - Visit the Centers for Disease Control and Prevention website to learn more.
- Talk to your health care team about safely caring for your pets.



*Scan to learn more about infection prevention.*

#### During and for 48-72 Hours After Chemo

- Sit on the toilet to avoid splashing and flush it twice after each use.
- Use 2 pairs of gloves if touching any body fluids.
- Clean any places and clothing that come in contact with body fluids with warm, soapy water.



*Scan to learn more about chemotherapy safety.*

#### Sex and Your Cancer Treatment

- Prevent infection and pregnancy while receiving treatment.
  - Use barrier contraceptives.
- Talk to your health care team about fertility concerns.



*Scan to learn more about sex and treatment.*

# Opioid Safety

**An opioid is a strong prescription pain medication. Some possible side effects include nausea/vomiting, sleepiness/dizziness, and constipation.**

## Common names of opioids

- Hydrocodone (Vicodin, Norco)
- Oxycodone (Percocet, OxyContin)
- Morphine
- Codeine
- Fentanyl

## Safe Disposal of Unused Opioids

- If you no longer need to take opioid medications, have a plan for disposing of your medications.
- Medication disposal kiosks are located at:
  - Many pharmacies
  - Each Swedish campus

**Scan below for additional medication disposal sites:**



**Med-Project**



**WA Safe  
Medication Return  
Program**



## What You Need to Know

- Only use your opioids for the reason they were prescribed.
- Opioid use puts you at a risk of dependence, addiction, or overdose. Talk to your health care team about your risk.
- Ask your health care team if it is safe to use over-the-counter medication for pain control.
- Let your health care team know if you are taking any benzodiazepines.
- Do not mix opioids with alcohol or other medications.
- Talk to your health care team if your pain is not controlled.

## Opioid Storage

- Lock your pills and store them away from others.
- Keep a count of how many pills you have left.
- Do not store your opioids in places that allow easy access.

# Fall Prevention

**Cancer treatment can increase your risk for serious falls. It is important to prevent falls and potentially serious injuries before, during, and after your cancer treatment.**

## How can cancer treatment increase my fall risk? It may:

- Damage your nerves and impact your sensation in your feet and legs
- Make you prone to nausea and feeling lightheaded
- Impact your vision
- Increase your fatigue

## Fall Prevention at Swedish:

- Call for assistance before getting up if you feel lightheaded, weak, or unsteady
- Ask your health care team where the emergency pull cord is
- Move slowly
- Wear non-skid footwear
- Report any spills or hazards on the floor
- Use handrails in bathroom and halls
- Learn how to use assistive equipment

Discuss your fall history and any concerns you may have with your health care team. Let your health care team know of any falls and any symptoms of lightheadedness or weakness.



[Scan here for more information.](#)



## How to reduce your risk at home

- ☐ Install sufficient lighting and use night lights
- ☐ Continue to exercise and maintain your strength
- ☐ Install railings or support bars in hallways and bathrooms
- ☐ Rest on the edge of the chair or bed for a moment before standing up from a seated or lying position
- ☐ Wear shoes or socks with grip at all times
- ☐ Reduce clutter
- ☐ Secure rugs
- ☐ Use nonslip mats in the bath and shower
- ☐ Call for assistance when needed

## My fall prevention plan:

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# Coping with Cancer

**At SCI, we are here to support your physical and mental wellbeing every step of the way. You may have completed a psychosocial questionnaire at the beginning of your care. Please contact Oncology Social Work for more information.**

## Swedish Support Services

### Oncology Social Work

Offers supportive listening and counseling to help cope with treatment, manage stress and anxiety, and connect with financial, transportation, and housing resources. For more information, call the Social Work Referral Line:

- Ballard - **206-781-6359**
- Edmonds - **425-673-8328**
- First Hill - **206-386-3228**
- Issaquah - **425-313-4224**

### Psychiatry

Creates individualized treatment plans to help manage how cancer and its treatments impact your mood, thinking, and ability to manage stress. Call **206-215-2275** for more information.

### Classes and Support Groups

Swedish Cancer Institute offers free classes to support all patients: from newly diagnosed to patients in remission. All classes are facilitated by a certified class instructor.



*Scan to learn more about classes and support groups.*

## Community Support Services

- Cancer and Careers  
<https://cancerandcareers.org/en>
- Cancer Care - <https://cancercare.org>
- Cancer Hope Network  
<https://cancerhopenetwork.org>
- Cancer Lifeline - <https://cancerlifeline.org>
- Cancer Pathways - <https://cancerpathways.org>
- Triage Cancer - <https://triagecancer.org>

For additional resources, please see pages F-78 — F-80.

If you are having thoughts or feelings of harming yourself or others, please contact:

Suicide Prevention Lifeline ..... **Dial 988 or text HOME to 741741**

24-Hour Crisis Clinic Hotline.....**866-427-4747**



# Hospice, Home Care, and Grief Support Services

## Home Health

- Home health caregivers work with your health care team to provide needed, time-limited in-home care and services
- Services include: nursing, physical, occupational, and speech therapy, in-home safety assessment, medication management, social work, home health aide, and nutritional guidance

## Private Pay Home Care

- Home care agencies provide a wide range of in-home support including respite care, companionship, light housekeeping, personal care, and nursing services
- Services are paid for by the patient or family, rather than billed through insurance

## Hospice

- Offer end-of-life care to patients
- Addresses physical, emotional, social, and spiritual needs of the patient and their family
- Health care team includes nurses, social workers, chaplains, and volunteers

## Grief Support Services

Offer individual grief counseling, support groups, and programs for adults and children



**Hospice and Grief  
Support Services**



**Home Health**



## Questions to ask to a home care agency

- ☐ Is the agency licensed?
- ☐ What services do they provide? Are they available 24/7?
- ☐ When would services begin?
- ☐ How are necessary services determined over time?
- ☐ What caregivers could be involved in care?
- ☐ How many years of experience does the health care team have and how long have they been with the agency?
- ☐ Do they perform background checks on all staff?
- ☐ Who supervises the staff?
- ☐ Are the staff insured through the agency?
- ☐ Do the same caregivers attend to a client or do they rotate?
- ☐ What happens if a staff member does not show up?
- ☐ Can I request different caregivers if I'm not satisfied?

*Adapted from AARP*

# Dealing with Finances

Swedish is a not-for-profit organization committed to serving all people, regardless of their ability to pay. We can help you navigate insurance requirements and programs to cover hospital care, medication, and other services. If you cannot afford hospital services, you may qualify for financial assistance.



*Understand your health insurance plan and benefits.*



*Learn about prior authorization (medical pre-approval) and its impact on services you may need.*



*Know what you can do if your health insurance claims are denied.*



*Explore financial, insurance, and employment resources.*

*If you have concerns about finances, medical bills, or insurance, speak to your health care team for Swedish financial assistance resources.*



## Financial terms you should know

- **Deductible:** A dollar amount that you must pay each year for health services before the insurance plan will pay anything.
- **Co-payments or co-pays:** The amount you must pay at the time of service, usually a flat fee for office visits or other services.
- **Co-insurance:** A percentage of each medical bill you must pay even after you've paid the yearly deductible amount.
- **Out-of-pocket maximum:** The most an individual or family has to pay for services covered by the insurance in a plan year.

**Interpreter services**

Interpreter services are available to all Swedish patients (inpatient and outpatient) free of charge. Interpretation is available in a variety of languages, as well as for people with hearing or sight impairments. Swedish discourages family members from serving as interpreters as it may be difficult to translate complex medical terminology and ideas. The interpreters used by Swedish are specially trained to work in the medical field. If you would like more information about interpreter services at Swedish, please talk to your health care team.

# Community Resources for Patients with Cancer and Families

Many national and local community organizations offer help and support to patients with cancer and their families.

**General resources**

**American Cancer Society (ACS)**

*Cancer.org*

**Toll-free 1-800-ACS-2345 (1-800-227-2345)**

- Cancer Support Groups
- Cancer Survivors Network
- General Information
- National Cancer Information Center
- Reach to Recovery
- Road to Recovery
- Transportation Assistance
- Tender Loving Care Program

**American Institute for Cancer Research (AICR)**

*AICR.org*

**Toll-free 1-800-843-8114**

- Diet and nutrition information

**Cancer Care**

*CancerCare.org*

**Toll-free 1-800-813-HOPE (1-800-813-4673)**

- Resource navigation
- Educational workshops
- Online support groups
- Limited financial assistance (view website for availability)

**Cancer Hope Network**

*CancerHopeNetwork.org*

**877-HOPENET (877-467-3638)**

One-on-one support:

- Patients with a cancer diagnosis
- Family members

(continued)

## Community Resources (continued)

### Cancer Lifeline

*Cancerlifeline.org*

**1-800-255-5505, 206-297-2500**

Here is a list of programs and services available through Cancer Lifeline:

- Information
- Community resources
- The Family Support program
- The Health Promotion program
- The Healing Arts program
- Support groups
- Workplace Services

### Cancer Pathways

*CancerPathways.org*

**206-709-1400**

- Social and emotional support
- Activities
- Workshops

### Cancer Support Community

*Cancersupportcommunity.org*

**888-793-9355**

- Personalized support from experts and peers

### National Institute of Health (NIH) Cancer Services:

#### National Cancer Institute

*Cancer.gov*

**1-800-4-CANCER (1-800-422-6237)**

- Government agency with cancer information and educational resources

#### Cancer Information Service (CIS)

*Cancer.gov/aboutnci/cis*

**1-800-4-CANCER (1-800-422-6237)**

- Cancer education in many languages

#### Cancer Clinical Trials

*CancerTrials.nci.nih.gov*

**1-800-4-CANCER (1-800-422-6237)**

- Information on cancer clinical trials

### CancerNet (including PDQ)

*Cancer.gov/publications/pdq*

- Cancer information for health professionals and the public

### CaringBridge

*CaringBridge.org*

**651-452-7940**

Free website platforms to update your care-community

### Harmony Hill Retreat Center

*HarmonyHill.org*

**360-898-2363**

Focused on healthy living and supporting those affected by cancer via:

- Onsite retreats with supportive care activities
- Offsite workshops
- Webinars

### National Coalition of Cancer Survivors (NCCS)

*CancerAdvocacy.org*

**1-877-NCCS-YES (1-877-622-7937)**

- Support and education for cancer survivors

### National Comprehensive Cancer Network

*www.nccn.org*

**215-690-0300**

- Treatment and cancer-specific educational materials for patients

### Northwest Hope and Healing

*NWHopeAndHealing.org*

**206-455-2710**

- “Healing Boxes” to SCI for newly diagnosed patients
- Financial assistance to people with breast or gynecological cancers

(continued)

## Community Resources (continued)

**Oncolink**

*Oncolink.com*

Information on:

- Cancer types
- Treatments
- Cancer care

**PAN Foundation**

*Panfoundation.org*

- Offers disease specific grant opportunities

**Patient Advocate Foundation**

*Patientadvocate.org*

**800-532-5274**

Provides:

- Case management support
- Financial aid
- Education materials

**Team Survivor Northwest**

*TeamSurvivorNW.org*

**206-732-8350**

Empowering all women who have had a cancer diagnosis to thrive through:

- Free fitness classes
- Seasonal outdoor programs
- Strong community

**Young Survival Coalition**

*YoungSurvival.org*

*SeattleYSCF2F@gmail.com*

**971-219-0012**

- Breast cancer resources
- Connections
- Education

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## Resources for Specific Types of Cancer

**Bladder cancer****American Urological Association**

*UrologyHealth.org*

**1-800-828-7866**

Information about prostate, bladder and kidney cancers

**Brain cancer****American Brain Tumor Association (ABTA)**

*Abta.org*

**1-800-886-2282**

**Breast cancer****African-American Breast Cancer Alliance (AABCA)**

*AABCAInc.org*

**612-462-6813**

**After Breast Cancer Diagnosis**

*AbcdBreast*

*CancerSupport.org*

**1-800-977-4121**

**Breast Reconstruction Surgery American Society of Plastic Surgeons (ASPS)**

*PlasticSurgery.org/BreastReconstruction*

**1-800-766-4955**

(continued)

## Resources for Specific Types of Cancer (continued)

### **Cierra Sisters**

*Cierrasisters.org*

**206-505-9194**

### **Komen for the Cure**

*National: Komen.org*

*Local: KomenPugetSound.org*

**1-877-GO-KOMEN (1-877-465-6636)**

**Puget Sound Chapter: 206-633-0303**

### **Living Beyond Breast Cancer**

*lbbc.org*

**855-807-6386**

### **American Cancer Society: Reach to Recovery**

*Cancer.org*

**1-800-ACS-2345 (1-800-227-2345)**

### **Rivkin Center**

*Rivkin.org*

**206-490-0847**

### **Young Survival Coalition – Seattle**

*YoungSurvival.org*

**206-322-9965**

## **Colorectal cancer**

### **Colorectal Cancer Alliance**

*www.ccalliance.org*

**202-628-0123**

### **Colon Stars**

*colonstars.org*

### **National Colorectal Cancer Roundtable**

*Nccrt.org*

## **Head, Neck, and Oral cancers**

### **Head and Neck Cancer Alliance**

*headandneck.org*

**1-866-792-4622**

### **Support for People with Oral and Head and Neck Cancer Inc. (SPOHNC)**

*SPOHNC.org*

**1-800-377-0928**

### **Oral Cancer Foundation**

*OralCancer.org*

**949-723-4400**

## **Kidney cancer**

### **American Urological Association**

*UrologyHealth.org*

**1-800-828-7866**

## **Leukemia and lymphoma**

### **The Leukemia and Lymphoma Society**

*LLS.org*

**800-955-4572**

### **Lymphoma Research Foundation of America Inc. (LRFA)**

*Lymphoma.org*

**1-800-500-9976**

## **Lung cancer**

### **American Lung Association (ALA)**

*LungUSA.org*

**1-800-LUNG-USA (1-800-586-4872)**

### **GRACE: Global Resource for Advancing Cancer Education**

*CancerGrace.org*

**888-501-1025**

### **Lungevity**

*Lungevity.org*

**844-360-5864**

(continued)

## Resources for Specific Types of Cancer (continued)

### Multiple myeloma

**Multiple Myeloma Research Foundation**

[MultipleMyeloma.org](http://MultipleMyeloma.org)

203-229-0464

### Ovarian cancer

**Ovarian Cancer Research Alliance**

[ocrahope.org](http://ocrahope.org)

212-268-1002

**Rivkin Center**

[Rivkin.org](http://Rivkin.org)

206-490-0847

### Prostate cancer

**American Urological Association Foundation**

[UrologyHealth.org](http://UrologyHealth.org)

1-800-828-7866

**ZERO**

[Zerocancer.org](http://Zerocancer.org)

844-244-1309

### Urological cancer

**American Urological Association Foundation**

[UrologyHealth.org](http://UrologyHealth.org)

1-800-828-7866

### Culturally-specific resources

**African American Breast Cancer Alliance (AABCA)**

[Aabacainc.org](http://Aabacainc.org)

612-462-6813

**Cierra Sisters Inc.**

[CierraSisters.org](http://CierraSisters.org)

206-505-9194

### For family and caregivers

**Caregivers Action Network**

[CaregiverAction.org](http://CaregiverAction.org)

202-454-3970

**Well Spouse Foundation**

[WellSpouse.org](http://WellSpouse.org)

866-889-9347

### Other helpful organizations

**Cancer and Careers**

[cancerandcareers.org](http://cancerandcareers.org)

646-929-8032

**Hospice Foundation of America**

[hospicefoundation.org](http://hospicefoundation.org)

202-457-5811

**National Hospice and Palliative Care Organization**

[NHPCO.org](http://NHPCO.org)

703-837-1500

**National Lymphedema Network (NLN)**

[LymphNet.org](http://LymphNet.org)

1-800-541-3259

**Pancreatic Cancer Action Network**

[pancan.org](http://pancan.org)

877-272-6226

**Triage Cancer**

[Triagecancer.org](http://Triagecancer.org)

424-258-4628

**WA DOH - ALTSA**

[dshs.wa.gov/altsa](http://dshs.wa.gov/altsa)

360-725-2300

**Social Security Administration**

[SSA.gov](http://SSA.gov)

1-800-772-1213

**Washington State Ferry Medical Preference Form**

1-888-808-7977; 206-464-6400

# Legal

## Advance directives

Having choices in how you want to live as life is nearing the end is vital to your dignity and well-being. Having these conversations while you are still able will ensure your wishes will be honored when the time comes. We encourage you and your family to start the conversation now and make a personal plan for your end-of-life care wishes. Ask your health care team for a copy of the Advance Directives booklet. Live life with choices, honor, and dignity. Please talk to your clinic's social worker if you have any questions about Advance Directives.

## Swedish Medical Center Uniform Donor Pledge

Cornea, organ, and tissue donation is one of the greatest gifts a person can give. Knowing that their loved one has left a lasting legacy of hope and healing can provide comfort and solace to donor families. For transplant recipients and patients on the transplant waiting list, the gift of donation offers a second chance at seeing and at life—a chance to move forward and fulfill that legacy left behind by their gracious donor. Should you choose to become a donor, we have included the form for your convenience.

Life Center NW  
[LCNW.org/donation](http://LCNW.org/donation)

## SWEDISH MEDICAL CENTER UNIFORM DONOR PLEDGE FORM

Date: \_\_\_\_\_

With the hope that I may help others, I hereby make this anatomical gift, if medically acceptable, to take effect upon my death.

I agree to donate the following: (please initial)

Eyes\* \_\_\_\_\_

Skin grafts \_\_\_\_\_

Bones \_\_\_\_\_

Kidneys \_\_\_\_\_

Heart \_\_\_\_\_

Lungs \_\_\_\_\_

Liver \_\_\_\_\_

Pancreas \_\_\_\_\_

As needed for the purpose of transplantation, therapy, medical research or education, I further direct my next-of-kin herein named to execute this gift after my death.

Signed by donor, next-of-kin and one witness.

\_\_\_\_\_  
NAME OF DONOR (PLEASE PRINT)

\_\_\_\_\_  
SIGNATURE OF DONOR

\_\_\_\_\_  
SIGNATURE OF NEXT-OF-KIN

\_\_\_\_\_  
RELATIONSHIP OF NEXT-OF-KIN

\_\_\_\_\_  
ADDRESS OF NEXT-OF-KIN

\_\_\_\_\_  
SIGNATURE OF WITNESS

*\*Please note that patients with cancer are only eligible to donate corneas. However, family members and friends are also encouraged to fill out a Uniform Donor Pledge.*

## IMMUNOTHERAPY WALLET CARD

Cancer DX: \_\_\_\_\_ Oncologist: \_\_\_\_\_

I am receiving/have received: \_\_\_\_\_ Day Phone: \_\_\_\_\_

☐ Checkpoint Inhibitor(s) \_\_\_\_\_

Medication Name(s): \_\_\_\_\_ After hours: \_\_\_\_\_

\_\_\_\_\_

☐ Clinical trial participant

Other Cancer Medications: \_\_\_\_\_ *Notify Research about admission:* \_\_\_\_\_

\_\_\_\_\_

Please show this card upon arrival to a hospital emergency department or arrival of ambulance paramedics.

**Immunotherapy is NOT chemotherapy and side effects can be life-threatening and must be managed differently.**

**This patient may present with immune-mediated side effects:** Adrenal insufficiency, rash, diarrhea, abdominal pain, cough, fatigue, headaches, vision changes, decreased urination, blood in urine, severe and worsening muscle pain, flu-like symptoms, organ inflammation.

Immune-mediated side effects are common with checkpoint inhibitors & may vary in severity. They may require referral and steroids. Patients have a lifetime risk of immune-related side effects. **Consult with oncology if there is concern for immunotherapy toxicities.**

Providence  SWEDISH

## CANCER TREATMENT WALLET CARD

Cancer DX: \_\_\_\_\_ Oncologist: \_\_\_\_\_

Treatment: \_\_\_\_\_ Day Phone: \_\_\_\_\_

Medication Name(s): \_\_\_\_\_ After hours: \_\_\_\_\_

\_\_\_\_\_

☐ Clinical trial participant

Other Cancer Medications: \_\_\_\_\_ *Notify Research about admission:* \_\_\_\_\_

\_\_\_\_\_

Please show this card upon arrival to a hospital emergency department or arrival of ambulance paramedics.

Side effects: \_\_\_\_\_

\_\_\_\_\_

Oral medication dose is: \_\_\_\_\_

Specialty Pharmacy # \_\_\_\_\_

**Emergency Contact**

**Name:** \_\_\_\_\_

**Relation:** \_\_\_\_\_

**Phone #:** \_\_\_\_\_

Providence  SWEDISH

## HEMATOLOGY WALLET CARD

Cancer DX: \_\_\_\_\_ Oncologist: \_\_\_\_\_

I am receiving/have received: \_\_\_\_\_ Day Phone: \_\_\_\_\_

☐ Stem Cell Transplant \_\_\_\_\_

☐ CAR T-Cell Therapy \_\_\_\_\_

☐ Bispecific Antibody \_\_\_\_\_

Medication Name(s): \_\_\_\_\_ After hours: \_\_\_\_\_

\_\_\_\_\_

☐ Clinical trial participant

Other Cancer Medications: \_\_\_\_\_ *Notify Research about admission:* \_\_\_\_\_

\_\_\_\_\_

Please show this card upon arrival to a hospital emergency department or arrival of ambulance paramedics.

Side effects: \_\_\_\_\_

\_\_\_\_\_

**Emergency Contact**

**Name:** \_\_\_\_\_

**Relation:** \_\_\_\_\_

**Phone #:** \_\_\_\_\_

**Notify your health care team of your specific cancer treatment medications.**

Providence  SWEDISH



# Glossary



# Common Diagnostic Procedures

**Your doctor may order one or several of the diagnostic tests described in this section. Remember, these are general descriptions. If you have any questions before, during or after a procedure, talk to your doctor, nurse or the technician running the test. It is part of their job to answer any questions you may have.**

## CT scan

CT stands for “computed tomography.” In a CT scan, dozens of low-dose X-rays are taken all at once from various angles. The information is fed into a computer, which produces highly detailed, cross-sectional pictures of the body. (If you think of the body as a loaf of bread, what the CT scan can do is provide a highly detailed image of any “slice” of that loaf.) Unlike regular X-rays, these pictures can show tiny differences present in soft tissue and bone. CT scans are typically used to look for cancer in various organs.

A scanning CT machine is shaped like a big doughnut or ring, and most of your body will be outside of the ring. If your doctor has ordered a CT scan for you, you will be asked to lie very still — and perhaps hold your breath at times — on an examining-room-type table while the machine takes pictures of you. Typically, you can remain in your clothes, although all jewelry and metal will need to be removed. You will not see anything, but you will hear a whirring noise that sounds a lot like a clothes dryer when it is drying clothes.

Depending on what your physician has ordered, before the scanning, you might be asked to drink a “smoothie” or similar type of thick drink that will coat your intestines so it will show up as a different color on the final image. Your doctor may also want to use a contrasting solution to highlight blood vessels and get the best possible images. If this is the case, a small amount of liquid will be given through a tiny needle in a vein in your arm. When the screening is over, the needle will be removed. Some people experience a salty taste or feel warmth during the injection of the dye, but those are generally the only side effects. (Be sure to tell your doctor, nurse, and radiology staff if you have any iodine allergies.)

The scanning itself usually takes about 20 minutes. The whole process, however, can take about two and a half hours.

## PET/CT scan

Positron emission tomography (PET) and computerized tomography (CT) are both state-of-the-art imaging tools that allow physicians to pinpoint the location of cancer within the body before making treatment recommendations. The highly sensitive PET scan shows the biology of disorders at the molecular level, while the CT scan provides a detailed picture of the body’s internal anatomy. The PET/CT scan combines the strengths of these two types of imaging into a single scan.

A PET scan is very different from an ultrasound, X-ray, MRI, or CT scan. A PET scan allows the physician to distinguish between different tissues.

It can help the physician detect abnormalities at a very early stage, generally before physical changes are visible.

Alone, each imaging test has particular benefits and limitations; but, by combining these two advanced technologies, physicians can more accurately diagnose, localize, and monitor cancer.

You will receive specific instructions about what not to eat prior to your exam. Usually, a high-protein, low-starch or low-sugar diet is recommended for 24 hours prior to the exam.

You may be asked to drink a smoothie or get a small amount of liquid through a tiny needle in a vein in your arm. You will then have to wait approximately one hour before the test.

After the exam, you should drink plenty of fluids and you can resume your regular diet.

*(Continued)*

## Common Diagnostic Procedures (continued)

### MRI

MRI stands for “magnetic resonance imaging.” “Resonance,” in this case, means “echo.” Instead of X-rays, the MRI uses a strong magnetic field and the pulse of radio waves to create echoes that bounce off tissues and organs in the body. A computer translates these echoes into pictures. MRI can produce detailed images of organs and soft tissues and can pinpoint the exact location and size of a tumor.

The MRI scanning machine is like a tunnel, open at each end. If you are having one done, you will be asked to lie on a narrow table, which slides into this tunnel. Getting an MRI takes about 30 to 60 minutes. Prior to the test, you will be asked to change into a hospital gown and remove all jewelry and metal objects. Be sure to tell your doctor if you have a pacemaker, hearing aid or other electrical device since the machine may interfere with these devices.

Your doctor may also want to use a dye solution that will provide an even better image of the area to be scanned. If so, you will be given an injection of a small dose of liquid that passes quickly through your system.

During the MRI, you will not see or feel anything, but you will hear the loud “thud-thud-thud” of the machine as the magnetic field inside the machine whirls around. The part of the body to be scanned will be the part in the center of the machine. If, for example, you are having an MRI of your knee, your knee will be in the center of the tunnel and your head will be close to the opening at one end. Some people feel claustrophobic while they are inside this tunnel. There is a “rear-view mirror” that allows you to see out and a two-way speaker near your head, which allows you to hear and talk to the person who runs the machine. A cool washcloth placed over the eyes often helps with discomfort. If you are concerned about feeling severe claustrophobia during this test, let your doctor know in advance. Your provider may prescribe a mild sedative for you to take before this scanning is done. If you do take a sedative, be sure to have someone else drive you to and from the procedure.

### Ultrasound

Many people associate getting an ultrasound with pregnancies. However, the ultrasound procedure can also be very useful in locating and measuring tumors.

Ultrasound uses high-frequency sound waves to produce echoes that bounce off of various tissues. A computer transforms these echoes into pictures. Because tumors give off different echoes than normal tissue, they may show up in these pictures. An ultrasound can show the location and size of a tumor.

An ultrasound procedure takes only 5 to 30 minutes and can be done in a doctor’s office. During the procedure, a technician pours a special gel on a handheld device and rubs the device firmly over the part of the body being observed. The gel helps transmit the sound waves. If you are having an ultrasound, you will not hear anything — the sound waves are too high-pitched. You will feel a slight pressure as the technician moves the device. You may also notice the “gooeyness” of the gel, which can be easily wiped away with a tissue.

### Nuclear scan

Nuclear scans utilize small amounts of low-energy radioactive substances to detect cancers. Nuclear scanning can provide images that show changes in the function of cells and organs. A nuclear bone scan, for example, can reveal the reaction of bone cells to the presence of cancer in the bone before there is pain or before the cancer does enough structural damage to show up in an X-ray. A PET scan is a type of nuclear scan that may indicate the presence of a tumor.

If you are getting a nuclear scan, you will either be given an injection or asked to swallow a small amount of radioactive liquid. While the idea of drinking something termed “radioactive” sounds a little scary, the amount of radioactivity is harmless. While traveling through the body, certain radioactive substances concentrate in areas where cells are dividing at an abnormal rate, indicating the presence of cancer.

*(Continued)*

## Common Diagnostic Procedures (continued)

Depending on the situation, it takes anywhere from a few minutes to two hours for the substance to reach the organ being scanned. At that point, you will be asked to lie flat under a large machine. The machine detects the substance, takes two-dimensional pictures of the organ being examined, and shows whether it is functioning normally or if there is a tumor present. To complete this procedure, you will be asked to change into a gown. The scanning process itself will take approximately 20 to 30 minutes. You will not see, hear or taste anything, and you should not have any side effects after the procedure is completed.

### Endoscopy

Endoscopy is a way of looking inside the body using a flexible tube that has a small camera on the end of it. This instrument is called an endoscope.

Many endoscopic procedures can be done in a doctor's office or in an outpatient facility. Different types of scopes are used in various parts of the body, although the basic procedure is the same. Examples of the various

"oscopies" and the areas they refer to include:

- **Bronchoscopy:** main airways of the lungs
- **Colonoscopy:** colon (large intestine)
- **Cystoscopy:** bladder

Patients undergoing endoscopy are often sedated so they are comfortable. They usually sleep through the procedure.

If you are having any type of procedure, questions you may want to ask your doctor include:

- What are you looking for?
- Where will the procedure take place – in the hospital or doctor's office?
- How long will it take?
- What do I have to do to prepare for it?
- When will results be back?
- Will I be sedated or feel any discomfort?
- Will I need someone to drive me home after the procedure?

## Glossary

**Abdomen:** The part of the body that contains the pancreas, stomach, intestines, liver, gallbladder, and other organs.

**Adjuvant therapy:** Treatment given after the primary treatment to make it work more effectively. Adjuvant therapy may include chemotherapy, radiation therapy or hormone therapy.

**Alopecia:** Hair loss.

**Absolute neutrophil count (ANC):** A measure of the number of neutrophils in the blood. Neutrophils are a type of white blood cell. An ANC may be used to check for infection, inflammation, leukemia, and other conditions. The lower a person's ANC is, the higher the risk is of getting an infection.

**Anemia:** Low levels of red blood cells. Symptoms of anemia include feeling tired, weak, and short of breath.

**Anesthesia:** Loss of feeling or awareness. Local anesthetics cause loss of feeling in a part of the body. General anesthetics put the person to sleep.

**Antiemetic:** A medicine that prevents or controls nausea and vomiting.

**Barium enema:** A procedure in which a liquid with barium in it is put into the rectum and colon by way of the rectum. Barium is a silver-white metallic compound that helps to show the image of the lower gastrointestinal tract on an X-ray.

**Benign:** Refers to a tumor that is not cancerous and does not invade nearby tissue or spread to other parts of the body.

(Continued)

## Glossary (continued)

**Biopsy:** A procedure used to remove cells or tissues to look at them under a microscope to check for signs of disease. When an entire tumor or lesion is removed, the procedure is called an excisional biopsy. When only a sample of tissue is removed, the procedure is called an incisional biopsy or core biopsy. When a sample of tissue or fluid is removed with a needle, the procedure is called a needle biopsy or fine-needle aspiration. Stages of cancer are partly determined by the results of a biopsy.

**Blood-cell count:** The number of red blood cells, white blood cells and platelets in a sample of blood. This is also called complete blood count (CBC).

**Bone marrow:** The inner, spongy tissue of bones where blood cells are made.

**Bone marrow transplantation:** A procedure to replace bone marrow destroyed by treatment with high doses of anticancer drugs or radiation. Transplantation may be autologous (the person's marrow saved before treatment), allogeneic (marrow donated by someone else) or syngeneic (marrow donated by an identical twin).

**Bone scan:** An imaging test that shows areas of increased or decreased bone turnover.

**Brachytherapy:** Radioactive material sealed in needles, seeds, wires, or catheters is placed directly into or near the tumor. Also called internal radiation therapy or implant radiation.

**Carcinogen:** Any substance that causes cancer.

**Catheter:** A flexible tube used to deliver fluids into or withdraw fluids from the body.

**Central nervous system (CNS):** The brain and spinal cord.

**Central venous catheter:** A special thin, flexible tube placed in a large vein. It remains there for as long as it is needed to deliver fluids or for blood draws. Also called a "central line," with types including Port-A-Cath, Hickman and PICC line.

**Cerebrospinal fluid (CSF):** The fluid flowing around the brain and spinal cord.

**Chromosomes:** Thread-like bodies found in the nucleus, or center part, of a cell that carry DNA. Chromosomes house information about heredity.

**Colonoscope:** A thin, lighted tube used to examine the inside of the colon.

**Colony-stimulating factors:** Substances that stimulate the production of white blood cells. Colony-stimulating factors include granulocyte colony-stimulating factors (also called G-CSF and filgrastim), granulocyte-macrophage colony-stimulating factors (also called GM-CSF and sargramostim) and promegapoeitin.

**CyberKnife:** This treatment uses computerized robotic equipment to deliver high-dose radiation with extreme accuracy and little damage to surrounding tissue. Patients must meet certain criteria.

**Digital rectal examination (DRE):** An examination in which a doctor inserts a lubricated, gloved finger into the rectum to feel for abnormalities.

**Diuretics:** Drugs that help the body get rid of excess water and salt.

**Dysplasia:** Cells that look abnormal under a microscope but are not cancerous.

**Estrogens:** A family of hormones that promote the development and maintenance of female sex characteristics.

**Excisional biopsy:** A surgical procedure in which an entire lump or suspicious area is removed for diagnosis. The tissue that has been removed is then examined under a microscope.

**External radiation:** Radiation therapy that uses a machine to aim high-energy rays at the cancer. Also called external-beam radiation.

**Fecal occult blood test:** A test to check for blood in stool. (Fecal refers to stool; occult means hidden.)

**Fertility:** The ability to produce children.

**Gamma Knife:** The Gamma Knife delivers 192 beams of radiation from multiple angles to a specific target with pinpoint accuracy while avoiding damage to the surrounding tissue through which the beams travel.

*(Continued)*

## Glossary (continued)

**Gastrointestinal:** The digestive tract, which includes the mouth, esophagus, stomach, and intestines.

**Gene:** The functional and physical unit of heredity passed from parent to offspring. Genes are pieces of DNA, and most genes contain the information for making a specific protein.

**Graft-versus-host disease (GVHD):** A reaction of donated bone marrow or peripheral stem cells against a person's tissue.

**Hickman catheter:** A type of central line that is usually placed in a large vein in the chest.

**Hormone replacement therapy (HRT):** Hormones (estrogen and/or progesterone) typically given to postmenopausal women or women who have had their ovaries surgically removed, in order to replace the estrogen no longer produced by the ovaries.

**Hormones:** Chemicals produced by glands in the body and circulated in the bloodstream. Hormones control the actions of certain cells or organs.

**Hysterectomy:** An operation in which the uterus is removed.

**Imaging:** Tests that produce pictures of areas inside the body.

**Immune system:** The complex group of organs and cells that defends the body against infection or disease.

**Impotent:** Inability to have an erection adequate for sexual intercourse.

**Incisional biopsy:** A surgical procedure in which a portion of a lump or a suspicious area is removed for diagnosis. The tissue is then examined under a microscope.

**Infusion:** Slow and/or prolonged intravenous delivery of a drug or fluids.

**Infertility:** The inability to produce children.

**Injection:** Using a syringe and needle to push fluids or drugs into the body, often called a "shot."

**Interferon:** A biological response modifier (a substance that stimulates the body's response to infection and

disease). Interferons affect the division of cancer cells and slow tumor growth. There are several types of interferons, including interferon-alfa, interferon-beta, and interferon-gamma. These substances are normally produced by the body. They are also made in the laboratory for use in treating cancer and other diseases.

**Interleukin-2 (IL-2):** A type of biological response modifier (a substance that can improve the body's natural response to disease) that stimulates the growth of certain disease-fighting blood cells in the immune system. These substances are normally produced by the body. Aldesleukin is IL-2 that is made in the laboratory for use in treating cancer and other diseases.

**Internal radiation:** Radiation therapy that is given internally. This is done by placing radioactive material, which is sealed in needles, seeds, wires, or catheters, directly in to or near the tumor. Also called implant radiation or brachytherapy.

**Intra-arterial (IA):** Into an artery.

**Intracavitary (IC):** Into a cavity or space, specifically the abdomen, pelvis, or the chest.

**Intralesional (IL):** Into the cancerous area in the skin.

**Intramuscular (IM):** Into a muscle.

**Intraperitoneal chemotherapy:** Treatment in which anticancer drugs are put directly into the abdominal cavity.

**Intrathecal (IT):** Into the spinal fluid.

**Intrathecal chemotherapy:** Anticancer drugs infused into the thin space between the lining of the spinal cord and brain to treat or reduce the risk of cancers in the brain and spinal cord.

**Intravenous (IV):** Into a vein, typically in the arms or chest.

**Laparotomy:** A surgical incision made in the wall of the abdomen.

**Leukemia:** Cancer of blood-forming cells.

(Continued)

## Glossary (continued)

**Local therapy:** Treatment that affects cells in the tumor and the area close to it.

**Lymph node:** A rounded mass of lymphatic tissue that is surrounded by a capsule of connective tissue. Also known as a lymph gland. Lymph nodes are spread out along lymphatic vessels and they contain many lymphocytes, which filter the lymphatic fluid (lymph). Lymph nodes are part of the immune system.

**Lymphedema:** Fluid retention or swelling in the arm or leg after lymph nodes are removed.

**Lymphatic system:** The tissues and organs that produce, store, and carry white blood cells that fight infection and other diseases. This system includes the bone marrow, spleen, thymus, and lymph nodes, as well as a network of thin tubes that carry lymph and white blood cells. These tubes branch, like blood vessels, into all the tissues of the body.

**Lymphoma:** Cancer that arises in cells of the lymphatic system.

**Malignant:** Another word for cancerous. A growth with a tendency to invade and destroy nearby tissue and spread to other parts of the body.

**Mammogram:** An X-ray of the breast.

**Mastectomy:** Excision (surgical removal) of the breast.

**Melanocytes:** Cells in the skin that produce and contain the pigment called melanin.

**Melanoma:** A form of skin cancer that arises in melanocytes, the cells that produce pigment. Melanoma usually begins in a mole.

**Metastasis:** The spread of cancer from one part of the body to another. Tumors formed from cells that have spread are called “secondary tumors” and contain cells that are like those in the original (primary) tumor. The plural is metastases.

**Microseeds:** A treatment for some prostate and breast cancers. A radiation oncologist will place low-dose, permanent radioactive seeds in the cavity where a tumor was removed. This procedure usually takes about an hour and is done several weeks after surgery. The microseeds treat the area over time and lose all potency

by the time treatment is complete. Patients must meet certain criteria.

**Mole:** A benign growth on the skin (usually tan, brown, or flesh-colored) that contains a cluster of melanocytes and surrounding supportive tissue.

**Monoclonal antibodies:** Laboratory-produced substances that can locate and bind to cancer cells wherever they are in the body. Many monoclonal antibodies are used in cancer detection or therapy; each one recognizes a different protein on certain cancer cells. Monoclonal antibodies can be used alone, or they can be used to deliver drugs, toxins, or radioactive material directly to the tumor.

**MUGA scan:** A scan that measures an important property of your heart: how well your heart pumps blood and when it beats.

**Mutation:** Any change in the DNA of a cell. Mutations may be caused by mistakes during cell division, or they may be caused by exposure to DNA-damaging agents in the environment. Mutations can be harmful, beneficial or have no effect. If they occur in cells that make eggs or sperm, they can be inherited. If they occur in other types of cells, they are not inherited. Certain mutations may lead to cancer or other diseases.

**Neoadjuvant therapy:** Treatment given before the primary treatment, pre-surgery (i.e., before removal of a tumor). Neoadjuvant therapy can be chemotherapy, radiation therapy or hormone therapy.

**Neutropenic:** Decrease in the number of white blood cells.

**Pap test:** The collection of cells from the cervix for examination under a microscope. It is used to detect changes that may be cancer or may lead to cancer and can show noncancerous conditions, such as infection or inflammation. Also called a Pap smear.

**Partial mastectomy:** Surgical removal of parts of breast tissue to ensure clear margins.

**Pelvis:** The lower part of the abdomen, located between the hip bones.

(Continued)

## Glossary (continued)

**Peripheral neuropathy:** A condition of the nervous system that usually begins in the hands and/or feet with symptoms of numbness, tingling, burning, and/or weakness. Can be caused by certain anticancer drugs.

**Per os (PO):** Latin for “by mouth;” orally.

**Progesterone:** A female hormone.

**Platelets:** Blood cells that help stop bleeding.

**Port:** A small plastic or metal container surgically placed under the skin and attached to a central venous catheter inside the body. Blood and fluids can enter or leave the body through the port using a special needle.

**Prognosis:** The likely outcome or course of a disease; the chance of recovery.

**Prosthesis:** An artificial device to replace a missing body part.

**Radioactive:** Giving off radiation.

**Radionuclide scanning:** A test that produces pictures (scans) of internal parts of the body. The person is given an injection or swallows a small amount of radioactive material. A machine called a scanner then measures the radioactivity in certain organs.

**Recur:** To occur again. Recurrence is the return of cancer, at the same site as the original (primary) tumor or in another location, after it had disappeared.

**Red blood cells:** Cells that supply oxygen to tissues throughout the body.

**Remission:** The partial or complete disappearance of signs and symptoms of cancer.

**Risk factor:** Anything that increases the chance of developing a disease.

**Screening:** Checking for disease when there are no symptoms.

**Sepsis:** An infection spread through the blood stream by virulent micro-organisms.

**Side effects:** Problems that occur when treatment affects healthy cells. Common side effects of cancer treatment are fatigue, nausea, vomiting, decreased blood cell counts, hair loss, and mouth sores.

**Sigmoidoscope:** A thin, lighted tube used to view the inside of the colon.

**Sonogram:** A computer picture of areas inside the body created by bouncing sound waves off organs and other tissues. Also called ultra-sonogram or ultrasound.

**Simulation:** The process used to plan radiation therapy so that the target area is precisely located and marked.

**Stem cells:** The cells that all blood cells come from.

**Steroid:** A potent anti-inflammatory agent which helps prevent drug reactions.

**Stomatitis:** Sores on the lining of the mouth.

**Subcutaneous (SQ or SC):** Under the skin.

**Sun protection factor (SPF):** A scale for rating the level of sunburn protection in sunscreen products. The higher the SPF, the more sunburn protection it provides. Sunscreen products with an SPF of 30 or higher provide high protection against sunburn and are sometimes recommended for people who are highly sensitive to the sun or who have a reaction in areas of their skin that have undergone radiation treatment.

**Sunscreen:** A substance that helps protect the skin from the sun’s harmful rays. Sunscreens reflect, absorb, and/or scatter both UVA and UVB radiation. Using lotions, creams or gels that contain sunscreens can help protect the skin from premature skin aging and damage that may lead to skin cancer.

**Systemic therapy:** Treatment that uses substances that travel through the bloodstream, reaching and affecting cells all over the body.

**Telangiectasia:** A skin lesion that results from dilation of a group of small blood vessels.

**Tissue:** A group or layer of cells that together perform specific functions.

**Transfusion:** The replacing of lost red blood cells and platelets.

**Treatment port or treatment field:** The place on the body at which the radiation beam is aimed.

(Continued)

## Glossary (continued)

**Tumor:** An abnormal mass of tissue that results from excessive cell division. Tumors perform no useful body function. They may be either benign (not cancerous) or malignant (cancerous).

**Ultraviolet radiation:** Invisible rays that are part of the energy that comes from the sun. UV radiation can damage the skin and cause melanoma and other types of skin cancer.

**Unsealed internal radiation therapy:** Internal radiation therapy given by injecting a radioactive substance into

the bloodstream or a body cavity. This substance is not sealed in a container.

**White blood cell:** A type of cell in the immune system that helps the body fight infection and disease. White blood cells include lymphocytes, granulocytes, macrophages, and others.

**X-ray:** High-energy radiation used in low doses to diagnose diseases and in high doses to treat cancer.

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# Notes

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

## Notice of nondiscrimination and accessibility rights

Providence St. Joseph Health and its Affiliates<sup>1</sup> (collectively “PSJH”) comply with applicable Federal civil rights laws and do not discriminate against, exclude or treat differently any individuals accessing any PSJH Program or Activity on any basis prohibited by local, state or federal laws, including but not limited to on the basis of race, color, religious creed (including religious dress and grooming practices), national origin (including certain language use restrictions), ancestry, disability (mental and physical including HIV and AIDS), medical condition (including cancer and genetic characteristics), marital status, age, sex (including pregnancy, childbirth, breastfeeding and related medical conditions), gender, gender identity, gender expression and sexual orientation, genetic information (including family medical history), or military/veteran status as those terms are defined under federal and state laws and rules.

In compliance with the Americans with Disabilities Act (ADA), PSJH provides qualified interpreters and other auxiliary aids and services free of charge:

- (1) to people with disabilities to communicate effectively with us, such as: (a) Qualified sign language interpreters; and (b) Written information in other formats (large print, audio, accessible electronic formats, other formats); and
- (2) to people whose primary language is not English, such as: (a) Qualified interpreters; and (b) Information written in other languages.

If you need any of the above services, please contact the Civil Rights Coordinator below.

If you need Telecommunications Relay Services, please call 1-800-833-6384 or 7-1-1.

If you believe that PSJH has failed to provide these services or discriminated in another way on the basis of race, color, religious creed (including religious dress and grooming practices), national origin (including certain language use restrictions), ancestry, disability (mental and physical including HIV and AIDS), medical condition (including cancer and genetic characteristics), marital status, age, sex (including pregnancy, childbirth, breastfeeding and related medical conditions),

gender, gender identity, gender expression and sexual orientation, genetic information (including family medical history), or military/veteran status, you can file a grievance with PSJH by contacting the Civil Rights Coordinator for your location listed below:

| State/Service          | Civil Rights Coordinator                                                                                                                        |
|------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| Washington/<br>Swedish | Office of Compliance & Privacy<br>Swedish Health Services<br>747 Broadway<br>Seattle, WA 98122<br>Email: Compliance@Swedish.org<br>206-215-2613 |

You can file a grievance in person or by mail, fax or email. If you need help filing a grievance, the above-noted civil rights coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services  
200 Independence Avenue SW.,  
Room 509F, HHH Building,  
Washington, DC 20201  
1-800-368-1019, 800-537-7697 (TDD).

Complaint forms are available at:  
<http://www.hhs.gov/ocr/office/file/index.html>.

<sup>1</sup> For purposes of this notice, “Affiliates” is defined as any entity that is wholly owned or controlled by Providence St. Joseph Health (PSJH), Providence Health & Services, St. Joseph Health System, Western HealthConnect, Covenant Health Network, Inc., or is jointly owned or controlled by PSJH or its Affiliates and bears the Providence, Swedish Health Services, Swedish Edmonds, St. Joseph Health, Covenant Health Network, Covenant Health, Kadlec Regional Medical Center, or PacMed Clinics name.

Scan for information  
about Swedish's  
nondiscrimination policy



|                                        |                                                                                                                                                                                                                                                                                         |
|----------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Español (Spanish)                      | ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 888-311-9127 (TTY: 711).                                                                                                                                                     |
| 繁體中文 (Chinese)                         | 注意：如果您講中文，我們可以給您提供免費中文翻譯服務，請致電 888-311-9127 (TTY: 711)。                                                                                                                                                                                                                                 |
| Tiếng Việt (Vietnamese)                | CHÚ Ý: Nếu bạn nói Tiếng Việt, các dịch vụ hỗ trợ ngôn ngữ miễn phí có sẵn dành cho bạn. Gọi số 888-311-9127 (TTY: 711).                                                                                                                                                                |
| Tagalog (Tagalog – Filipino)           | PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 888-311-9127 (TTY: 711).                                                                                                                                   |
| (Korean)                               | 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 888-311-9127 (TTY: 711) 번으로 전화해 주십시오.                                                                                                                                                                                                    |
| Русский (Russian)                      | ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 888-311-9127 (телефайн: 711).                                                                                                                                                          |
| Հայերեն (Armenian)                     | Ուշադրություն: Եթե խոսում եք հայերեն, ապա ձեզ կարող են տրամադրվել լեզվական աջակցության անվճար ծառայություններ: Ձանգահարեք 888-311-9127 (հեռախոյալ (TTY) 711).                                                                                                                           |
| العربية (Arabic)                       | تُرجى الانتباه: إذا كنت تتكلمون اللغة العربية، فاعلموا أن خدمات المساعدة اللغوية متوفرة مجاناً لكم. اتصلوا برقم الهاتف 888-311-9127 [أو برقم الهاتف 888-311-9178 عند الاتصال بالمركز الطبي السعودي في إدموندز (Swedish Edmonds)] [أو بخط المبرقة الكاتبة TTY لضعاف السمع والنطق (711)]. |
| فارسی (Farsi) Persian (Farsi)          | توجه: اگر به زبان فارسی صحبت می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. شماره 888-311-9127 تماس بگیرید. (TTY: 711)                                                                                                                                                     |
| 日本語 (Japanese)                         | 注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。 888-311-9127 (TTY:711) まで、お電話にてご連絡ください。                                                                                                                                                                                                              |
| ਪੰਜਾਬੀ (Punjabi) Panjabi*              | ਧਿਆਨ ਧਿਓ: ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਿੰਦੇ ਹੋ, ਤਾਂ ਬਾਧਾ ਫਾਇਜ਼ ਮਹਾਇਤਾ ਸੇਵਾ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਉਪਲਬਧ ਹੈ। 888-311-9127 (TTY: 711) 'ਤੇ ਕਾਲ ਕਰੋ।                                                                                                                                                          |
| ខ្មែរ (Cambodian) Mon-Khmer, Cambodian | សូមចាំការប្រុងប្រយ័ត្ន៖ ប្រសិនបើលោកអ្នកនិយាយភាសាខ្មែរ នោះសេវាជំនួយផ្នែកភាសានឹងមានផ្តល់ជូនលោកអ្នកដោយឥតគិតថ្លៃ។ សូមទូរស័ព្ទទៅលេខ 888-311-9127 (TTY: 711)។                                                                                                                                 |
| हिंदी (Hindi)                          | ध्यान दें: यदि आप हिंदी बोलते हैं तो आपको लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 888-311-9127 (TTY: 711) पर कॉल करें।                                                                                                                                                             |
| Hmoob (Hmong)                          | LUS CEEV: Yog tias koj hais lus Hmoob, koj tuaj yeem siv cov kev pab txhais lus pub dawb. Hu rau 888-311-9127 (TTY: 711).                                                                                                                                                               |
| ภาษาไทย (Thai)                         | โปรดทราบ: หากคุณพูดภาษาไทย คุณสามารถใช้บริการความช่วยเหลือทางภาษาได้โดยไม่เสียค่าใช้จ่าย โทร 888-311-9127 (TTY: 711)                                                                                                                                                                    |
| Deutsch (German)                       | ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 888-311-9127 (TTY: 711).                                                                                                                                         |
| اردو (Urdu)                            | توجہ: اگر آپ اردو بولتے ہیں، تو آپ کو زبان کی مدد کی خدمات مفت میں دستیاب ہیں۔ کال کریں 888-311-9127 (TTY: 711)                                                                                                                                                                         |
| Українська (Ukrainian) Ukrainian*      | УВАГА! Якщо ви розмовляєте українською мовою, ви можете звернутися до безкоштовної служби мовної підтримки. Телефонуйте за номером 888-311-9127 (телефайн: 711).                                                                                                                        |
| Français (French)                      | ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 888-311-9127 (ATS: 711).                                                                                                                                               |
| Diné Bizaad (Navajo)                   | Díí baa ákó nínízin: Díí saad bee yáńítł'í go Diné Bizaad, saad bee áká'ánída' áwó'déé', t'áá' jik'eh, éí ná hólǫ́. kóij' hódíílníh 1-888-311-9127 (TTY: 711.)                                                                                                                          |
| ພາສາລາວ (Lao) Laotian                  | ໝາຍເຫດ: ຖ້າ ທ່ານ ກ່າວ ພາສາລາວ, ມີ ການບໍ ລິ ການຊ່ ອຍ ຕາມ ໂອ ານພາສາດ້ວຍ ະ ເສ ລອດ ັ ໃຫ້ ຕາ ັ ທ່ານ. ໂທ 888-311-9127 (TTY: 711).                                                                                                                                                             |
| ગુજરાતી (Gujarati)                     | મુખ્ય: જો તમે ગુજરાતી બોલતા છો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. કૃપા કરી 888-311-9127 (TTY: 711).                                                                                                                                                                     |
| Cushite*                               | XIYYEEFANNA: Afaan dubbattii Oroomiffa, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama. Bilbilaa 888-311-9127 (TTY: 711).                                                                                                                                                   |
| አማርኛ (Amharic) Amharic*                | ማስታወሻ: የጥናተና ቋንቋ አማርኛ ሆኖ የቴሌፎን ሊከፈል ድርጅቶች በገጸ ሊያገለግሉት ተገቢቷቸዋል። ወደ ሚስተለው ቁጥር ይደውሉ። 888-311-9127 (ጣቢያዊ ስልክ) 888-311-9127                                                                                                                                                                  |
| Română (Romanian) Romanian*            | ATENȚIE: Dacă vorbiți limba română, vă stau la dispoziție servicii de asistentă lingvistică, gratuit. Sunați la 888-311-9127 (TTY: 711).                                                                                                                                                |
| Gagana fa'a Sāmoa (Samoan) Samoan*     | MO LOU SILAIFAI: Afai e te tautala i le Gagana Samoa, o loo iai auunaga fesoasoani, e leai se totogi mo oe. Telefoni mai i le: 888-311-9127 (TTY:711)                                                                                                                                   |
| Ilokano (Ilocano) Ilocano*             | AGATENSIÓN: No agasaakoyá ití Ilocano, dagítí serbisíyo para tí tulong ití pagsaosá nga awan ti bayadan ket siaadda para kadakayo. Tawagan ti 888-311-9127 (TTY: 711).                                                                                                                  |
| Italiano (Italian)                     | ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 888-311-9127 (TTY: 711).                                                                                                                          |
| Polski (Polish)                        | UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 888-311-9127 (TTY: 711).                                                                                                                                                             |
| Norsk (Norwegian) Norwegian*           | MERK: Hvis du snakker norsk, er gratis språkassistanstjenester tilgjengelige for deg. Ring 888-311-9127 (TTY: 711).                                                                                                                                                                     |
| Deutsch (Pennsylvania Dutch)           | Wann du schwetzscht, kånnscht du mitaus Koschte ebbber gricke, ass dihr helfft mit die englisch Schprooch. Ruf selli Nummer uff: Call 888-311-9127 (TTY: 711).                                                                                                                          |
| Somali                                 | OGAYSIIIS: Hadaa ku hadasho luuqada Soomaaliga, waxaa kuu diyaara caawisyo xaga luuqa daada oo kuu bilaahsh ah Fadlan Wac taleefaankaan. 888-311-9127 (TTY: 711)                                                                                                                        |
| Tigrigna/Tigrinya                      | ኣትተንትን: እኛ ዮኡ ኢኢንት ትግርጊያ፣ ላንጉዳ ኣከስስታንጭኤ ከርገገጩኹ፣ ናርኢ እኛ ቻርጊ፣ ኣር ኣሸላሰለ ና ዮኡ። ጭልል: 1-888-311-9127 (ትትይ: 711)                                                                                                                                                                               |
| American Sign Language                 |                                                                                                                                                                                                      |



[swedish.org/cancer](https://swedish.org/cancer)