



APPHON/ROHPPA NEWSLETTER

Atlantic Provinces Pediatric Hematology/Oncology Network
Réseau d'Oncologie et Hématologie Pédiatrique des Provinces
Atlantiques

Board Executive:

Chair - Dr. Lynette Bowes
Vice Chair - Holly Morrison

Our Vision

To facilitate access for Atlantic Province children and youth to comprehensive, current, effective, evidence-based hematologic/oncologic treatment delivered as close to home as safely feasible.

Winter 2020

Save the Date - 2020 Conference

Our annual APPHON/ROHPPA Conference will be held **November 12, 13, 14, 2020 at the IWK**. The Board of Directors have agreed to host a conference every eighteen months, alternating between Spring and Fall.

Educational Sessions

APPHON/ROHPPA is excited to announce our bi-monthly educational webinars via **GoToMeeting**. A link can be found on our website for each session, as well an invite will be sent out.

We are pleased to host our first presentation on **April 1st from 12:15 noon-1:15pm**. The topic will be General Pediatric Assessment and will be presented by IWK Nurse Practitioner, **Marge Ancliffe**. The presentation will be recorded and available on our website for three months.

Upcoming APPHON Pediatric Chemotherapy and Biotherapy Provider Course

The APPHON Pediatric Chemotherapy and Biotherapy Provider Course will be

offered on **April 29th-30th, 2020** at the IWK Health Centre. The registration deadline is **March 27th, 2020**.

For more information visit our APPHON/ROHPPA website at: **<http://www.apphon-rohppa.com/en/system/files/u5/APHON%20brochure%20April%202020.pdf>**

The Association of Pediatric Hematology and Oncology Nurses (APHON) has developed a Provider Directory which allows for verification of Chemotherapy and Biotherapy Provider status and expiry. You do not need a login to access this website, use this link: **<http://apps.apphon.org/membership/ProviderDirectory>**

Online CYP-C Data Tool

The Cancer in Young People in Canada (CYP-C) has officially released its online CYP-C data tool. The Data Tool allows users to access childhood cancer surveillance data from both CYP-C and the Canadian Cancer Registry through simple drop-down menus.

CYP-C is a collaboration between the PHAC, all tertiary pediatric oncology centres in Canada, the C17 Council, and the Canadian Partnership Against Cancer. It can be accessed at: <https://health-infobase.canada.ca/data-tools/cypc>

CANO's Oncology Nurse Self-Assessment Tool

The Canadian Association of Nurses in Oncology (CANO) have consistently developed and maintained nursing standards and self-assessment tools specific to oncology. In the past, APPHON/ROHPPA recognized and adapted the self-assessment tools to reflect pediatric practice. In the latest CANO revisions, even though the document stated it included pediatrics, it was noted that the document required some alterations to adequately reflect pediatric oncology nursing practice. In 2017, a country wide working group (including two APPHON subspecialty nurses) reviewed the standards and self-assessment tool and made revision recommendations; CANO agreed to make these changes. At the APPHON/ROHPPA meeting in May 2019 those present discussed the adoption of the *CANO Standards and Competencies for Cancer Chemotherapy Nursing Practice Tool kit* for our Pediatric Oncology Practice. It was noted that many of the intermediate centers are already using this tool in the adult oncology practice and are quite familiar with it. We then put it out for an email response vote; the vast majority of the APPHON nursing group have agreed this tool is applicable to Pediatric Oncology Nursing Practice and would like to adopt it. We decided in the Nursing discussion, the self-assessment tool would not be mandatory by

APPHON/ROHPPA, but rather used by individual and institutional discretion as was the previous version.

For quick access, the following link is now available on the APPHON/ROHPPA website under *Levels of Care* https://cdn.ymaws.com/www.cano-acio.ca/resource/resmgr/standards/2018CANO_NSCA_Toolkit_V6.pdf

Height Measurement, IWK

There have been a few recent cases where patient heights have been recorded incorrectly. In some cases, the difference between recorded and actual height was greater than 5% which impacts chemotherapy and other medication dosing. APPHON/ROHPPA has asked Tricia MacPherson, IWK Hematologist/Oncologist Dietician to outline proper height measurement recording:

Serial, accurate growth measurement of children is an essential part of assessing a child. In oncology the height, along with weight and Body Mass Index (BMI), is used to track growth of the child as well as used for dosing of medications based on calculated body surface area. If the correct equipment isn't used, it can mean an unnecessary nutrition referral or a missed nutrition referral for poor nutrition, improper dosing of medication or parental concern that the child isn't growing. It can also make it difficult to assess the child's overall growth and nutritional status.

Measure stature for children/youth over 2 years who can stand unassisted. When measuring a child over the age of 2, the child must have shoes removed and no ponytails, hats, etc.

A stadiometer should be used for measuring height. The height measurement device on a scale or other floppy arm device is not accurate and is unacceptable. A measuring tape secured to the wall is not acceptable as well. A stadiometer requires: a wall mounted vertical board with an attached metric rule and a horizontal headpiece that can be brought into contact with the superior part of the head. The child or adolescent stands against the stadiometer without shoes, heels together and against the wall or stadiometer, legs straight, arms at side, shoulders relaxed.

Assistance may be required to ensure the child's/youth's legs are straight. Ensure the child/youth is looking straight ahead. Bring the perpendicular headpiece down to touch the crown of the head. The measurer's eyes are parallel with the headpiece. Measure to the nearest 0.1 cm. Repeat the procedure to validate accuracy of the first measurement. If the measurements vary by more than 0.5 cm, repeat the procedure a third time. Record the average measurement once two measurements are within 0.5 cm

Note: Children/youth with physical disabilities who are unable to stand may require other segmental length measurements such as arm span, knee height or sitting height measurements. These alternative measurements require special skills and equipment. Consult a dietitian to assist with these measurements if needed.

If you have any questions please contact:
patricia.macpherson@iwk.nshealth.ca

Dr. Jack Hand Education Fund

Congratulations to **Mary Jean Howitt, RN, Chantale Deyoung, RN, and Chantal Beaver, Child Life Specialist.** They were the recipients of 2019's *Jack Hand Award*. Mary Jean and Chantale attended the APHON Annual Conference in San Jose, CA. Chantal traveled to Banff, AB to attend the IPOS & CAPO World Congress of Psycho-Oncology. The deadline for this year's funding request is **June 30, 2020**. The application can be found at www.apphon-rohppa.com

CVAD - IWK Policy Change

To align with the new 2019 Canadian Vascular Access Association (CVAA) guidelines the IWK has changed practice and will now be heplocking implanted port-a-caths with 3mLs of **heparin 10u/mL** on deaccess. Port-a-cath frequency of heparinization has also changed to every **2 months** when a port is not in use.

Revised Febrile Neutropenia Treat Promptly Cards (Maritime Version)

We have recently revised the FN Treat Promptly Cards. It will be available on our website in March. The new cards will be sent home with patients at their next visit to the IWK.