

Staff Education Tool: Cancer: Phone Monitoring Assessment Guide

REVIEW PURPOSE OF TELEPHONE CALL WITH PATIENT:

• To check for current signs or symptoms related to your condition	• To promote early action for changes in condition
• To answer any questions you may have about your symptoms or treatment	• To help you to overcome problems with self-care management

ASSESSMENT OF CURRENT CONDITION- Questions to ask:

How have you felt since the last telephone call/home visit? __Better __Same __Worse	Review patient "Personal Plan" from Patient Self-Care Workbook (if identified and completed): Review patient identified goal(s) and progress towards goal(s)	What types of problems (if any) have you been having in managing your cancer / chemotherapy / symptoms ?
How would you describe your appetite? • Can you tell me what you have eaten in the last 24 hours? • How many glasses of liquids have you drank in the last 24 hours? • Can you tell me what you think is keeping you from eating? ○ Nausea and vomiting? ▪ Have you been taking your medications and have they worked to control nausea and vomiting? ○ Any soreness, burning in the mouth; difficulty swallowing? ○ Other?	Are you having any pain? Location? What is your current pain level using (0-10) scale? • Review patient's current pain goal • Are there times when your pain is worse or better? • Are you taking your pain medication on schedule? • Have you used breakthrough pain pills? (alternatively, intravenous/subcutaneous infusion bolus doses) ○ How often? ○ How many times in the last 24 hours? ○ What is your pain level after you take the breakthrough pain pills?	Describe current level of activity • Changes in level? • Increased fatigue? What is your current temperature? • Has it been any higher? • Any chills? Are you having any shortness of breath? • When does it occur? • How would you rate your shortness of breath using a 0-10 scale?
Medication use • Are all prescriptions currently filled? • Any problems with taking medications? • Any evidence of side effects?	When was your last bowel movement? • Any changes in consistency or color, straining?	Are there any other problems that you can tell me about?