

Clinical Management Plan for treatment of early breast cancer with Tamoxifen and Radiotherapy

Name of Patient	Patient medication sensitivities/allergies:
Patient identification-(Unit number and DOB)	
Patient history summary	
Independent Prescriber(s):	Supplementary Prescriber(s) Jane Mathlin Sherryl Jenkins Karen Williams
Condition(s) to be treated: Oestrogen receptor positive (ER+ve) breast cancer in pre-menopausal patients	Aim of treatment: Hormonal manipulation of ER+ve breast cancer in pre-menopausal patients and alleviation of radiotherapy side effects.
Further treatment and tests to be arranged.	
Medicines that may be prescribed by SP	

Preparation	Indication	Dose schedule	Specific indications for referral back to the IP
Tamoxifen	ER+ve breast cancer in pre-menopausal patients	20mg once a day as per BNF.	Side effects from Tamoxifen not tolerable for patient. Patient taking fluoxetine/ duloxetine or paroxetine
Skin Care: Unguentum M cream.	<i>Erythema relating to treatment.</i>	Apply 3-4 times daily to affected area.	<i>Unexpected side effects from cream.</i>
Hydrocortisone 1% cream.	<i>Itchy skin relating to treatment.</i>	Apply sparingly twice daily.	<i>Side effects from hydrocortisone cream.</i>
Canesten cream	<i>Fungal infection of skin</i>	Apply twice daily to affected area	<i>Treatment ineffective or skin broken down.</i>
IntraSite gel	<i>Treatment related moist desquamation.</i>	Apply daily to affected area.	<i>Treatment ineffective or signs of infection. RTOG grade 4 reaction.</i>
Polymem	<i>Treatment related moist desquamation not helped by aquaform gel</i>	Apply to affected area every 2-3 days depending on exudate.	<i>Treatment ineffective or signs of infection. RTOG grade 4 reaction.</i>
Cetirizine hydrochloride	<i>Itchy skin relating to radiotherapy. Hydrocortisone cream ineffective or contra-indicated</i>	10mg once a day as per BNF	<i>Treatment ineffective</i>
Analgesia: Paracetamol	<i>Pain relating to treatment.</i>	1 gram 4 times daily as per BNF.	
Co-codamol 30/500	<i>Pain relating to treatment not relieved by paracetamol.</i>	2 tablets 4 times daily as per BNF.	<i>Side effects from paracetamol.</i>
Ibuprofen	<i>Pain relating to treatment that has an inflammatory component and use of NSAID's not contra-indicated.</i>	400mg 3 times daily as per BNF.	<i>Unexpected side effects from co-codamol or treatment not effective.</i>
Nausea: Metoclopramide	<i>Nausea relating to radiotherapy</i>	10-20mg 3 times daily as per BNF	<i>Unexpected side effects from ibuprofen.</i> <i>Nausea not helped by anti-emetic.</i>
Guidelines or protocols supporting Clinical Management Plan: SE Wales Breast Group-“The development and maintenance of a high quality breast service in south east Wales” National Cancer Institute Common Toxicity Criteria			

Frequency of review and monitoring by:				
Supplementary prescriber weekly	Supplementary prescriber and independent prescriber Annually			
Process for reporting ADRs: Discuss with IP. Complete yellow card if serious, unexpected or black triangle drug.				
Shared record to be used by IP and SP: Velindre NHS Trust Medical Record and CANISC				
Agreed by independent prescriber(s)	Date	Agreed by supplementary prescriber(s)	Date	Date agreed with patient/carer

June 2015