

Clinical Management Plan for Treatment Colo-rectal and Anal cancer

Name of Patient	Patient medication sensitivities/allergies:
Patient identification-(Unit number and DOB)	
Patient history summary	
Independent Prescriber(s): Dr Richard Adams Dr Paul Shaw	Supplementary Prescriber(s) Jane Mathlin Sherryl Jenkins Karen Williams
Condition(s) to be treated Anal Cancer.	Aim of treatment To alleviate symptoms of Anal cancer/colo-rectal cancer and its treatment.
Further treatment and tests to be arranged. FBC and RLB	
Medicines that may be prescribed by SP	

Preparation	Indication	Dose schedule	Specific indications for referral back to the IP
Analgesia: Paracetamol	<i>Pain relating to anal cancer/colo-rectal cancer.</i>	1 gram 4 times daily as per BNF.	<i>Side effects from paracetamol.</i>
Co-codamol 30/500	<i>Pain relating to anal cancer/colo-rectal cancer not relieved by paracetamol.</i>	2 tablets 4 times daily as per BNF.	<i>Unexpected side effects from co-codamol.</i>
Ibuprofen	<i>Pain relating to anal cancer/colo-rectal cancer that has an inflammatory component and NSAID's not contra-indicated.</i>	400-800mg 3 times daily as per BNF.	<i>Unexpected side effects from ibuprofen or symptoms of gastritis.</i>
Oromorph solution 10mg in 5ml	<i>Pain relating to anal cancer/colo-rectal cancer not relieved by co-codamol 30/500.</i>	5 mls 4-6 hourly as per BNF.	<i>Pain not relieved by regular analgesia as detailed on CMP.</i>
Laxatives: Senna and magnesium hydroxide	<i>Constipation relating to disease or treatment</i>	Senna 2 tablets bd. Magnesium Hydroxide 10mls bd.	<i>Constipation not resolved in 3 days.</i>
Macrogols 3350		1-3 sachets daily as per BNF.	<i>Constipation not relieved in 3 days.</i>
Antiemetics: Metoclopramide.	<i>Constipation not resolved with senna and MgOH..</i>	10-20mg 3 times daily as per BNF.	<i>Unexpected side effects from metoclopramide.</i>
Cyclizine	<i>Nausea related to treatment of anal cancer/colo-rectal cancer.</i>	50mg 3 times daily as per BNF.	<i>Unexpected side effects from cyclizine, or treatment ineffective.</i>
Ondansetron	<i>Nausea relating to anal cancer/colo-rectal cancer not relieved by metoclopramide, or metoclopramide contra-indicated.</i>	8mg once a day as per BNF.	<i>Treatment ineffective.</i>
Omeprazole	<i>Nausea or vomiting relating to chemo and radiotherapy.</i>	20mg once a day.	
Skin care: Unguentum M cream.	<i>Acid related dyspepsia.</i>	Apply 3-4 times daily to affected area.	<i>Treatment ineffective.</i>
IntraSite gel	<i>Erythema relating to</i>	Apply daily to affected area.	<i>Unexpected side effects from cream.</i>

Guidelines or protocols supporting Clinical Management Plan: RTOG common toxicity criteria Velindre cancer centre oral care policy Velindre Cancer Centre constipation policy. WHO pain ladder.				
Frequency of review and monitoring by:				
Supplementary prescriber Weekly		Supplementary prescriber and independent prescriber Every month.		
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