

## Oncology Services in the Ambulatory Setting

Market forces have combined to create an environment in which patient-care safety issues often are compromised by overriding cost concerns. Administration of increasingly complex cancer therapies in the ambulatory setting mandates that patient safety be assured by the presence of qualified personnel and the appropriate use of technology. This position sets forth the minimum level of services necessary for the provision of safe oncology care in the ambulatory setting.

### It Is the Position of ONS That

- Regardless of setting (i.e., clinic, office, or home), patient safety must be the priority in planning and providing cancer care.
- Care for individuals with cancer is best accomplished by RNs who have been educated and certified in the oncology specialty.
- Nonacute services must ensure that
  - Personnel prepare and handle all antineoplastic medications in accordance with Oncology Nursing Society (ONS) and Occupational Safety and Health Administration guidelines.
  - An appropriate emergency response can be readily activated and all clinical staff are certified in basic life support.
  - Emergency medications (e.g., epinephrine, atropine, diphenhydramine) are readily available for use.
  - Guidelines appropriate for providing oncology nursing care are written and followed for the management of cardiac/respiratory arrest, anaphylactic reaction, fluid overload, hyper- and hypotension, seizures, extravasations, chemical spills, and other emergency sequelae that may occur.
- Prior to infusion of medications in the home setting, an RN who has been educated and certified in oncology nursing assesses patients and family members for their ability to identify and report untoward or adverse effects and to provide self-care and for their willingness to follow directions.
- Patients receiving continuous infusion therapy in the home setting have a vascular access device in place and either are under the care or supervision of a home infusion service that follows these guidelines or have 24-hour access to ambulatory/office professional staff.
- Patients and caregivers are given instructions for self-care.
- The patient/staff mix promotes a hazard-free, safe, and therapeutic environment.
- When conscious sedation is used
  - Written guidelines and policies are followed.
  - State regulations are enforced.
  - Oxygen and reversal medications (e.g., naloxone) are readily available for use.
  - When state regulations have not been developed to guide staff mix, advanced cardiac life support certification is the preferred level of emergency competencies.

### Background

ONS's *Cancer Chemotherapy Guidelines and Recommendations for Practice* (Fishman & Mrozek-Orlowski, 1999) is the recognized national standard for the safe administration of chemotherapy in all practice settings. In 1991, ONS released the "Position Regarding the

Preparation of the Professional Nurse Who Administers and Cares for the Individual Receiving Chemotherapy," which outlined the specialized preparation of the professional RN that ensures a safe level of care for the individual receiving chemotherapy. This statement was revised and updated in 1999. ONS's *Access Device Guidelines: Recommendations for Nursing Practice and Education* (Camp-Sorrell, 1996) and *Peripheral Blood Stem Cell Transplantation: Recommendations for Nursing Education and Practice* (Ezzzone, 1997) are additional nationally and internationally recognized standards. The ONS "Position on Quality Cancer Care" (2000) affirmed that the overall accountability and coordination of nursing care for individuals with cancer are best accomplished by the oncology certified nurse, the mandate for competent providers, and the informed partnership roles of patients and family members. The American Society of Clinical Oncology offers "Criteria for Facilities and Personnel for the Administration of Parenteral Systemic Antineoplastic Therapy" (1997). The blending of recommendations from these well-established and recognized resources forms the basis of this position.

### References

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