



My Treatment Book



Welcome to Auckland Radiation Oncology

The team at Auckland Radiation Oncology (ARO) know that this is a difficult time for both you and those closest to you; however you can be confident that your referring specialist has chosen ARO to be part of your care team because we are committed to providing the best possible treatment and care in a welcoming, calm and comfortable environment.

This booklet belongs to: _____

Specialist: _____ Ph: _____

Auckland Radiation
Oncology (ARO)

Ph: 09 623 6046

email: info@aro.co.nz

ARO Nurse

Ph: 09 623 6585

email: aronurses@aro.co.nz

ARO Receptionist

Ph: 09 623 6046

email: reception@aro.co.nz

ARO Scheduling

Ph: 09 623 5608 or 09 623 6831

email: admin@aro.co.nz

ARO Specialist Centre

Ph: 09 630 8510 or 09 623 5814

email: admin@aro.co.nz

Other important contacts:

Name: _____

Ph: _____ Email: _____

Name: _____

Ph: _____ Email: _____

Name: _____

Ph: _____ Email: _____

Your treatment book

This booklet contains important information specific to your treatment, so we ask that you take some time to read through this information. It covers what to expect before, during and after radiation therapy treatment. It also includes information about who will be taking care of you, what possible side effects may occur and how to manage these. Should you have any questions or concerns please contact us on 09 623 6046.

It is important you bring this booklet with you during your treatment with Auckland Radiation Oncology (ARO), including appointments with your radiation oncologist, treatment visits and other appointments at ARO. There are note pages at the back of your booklet so you can write special instructions, or raise any questions or concerns you may have during your treatment at ARO.

Getting started

To ensure that you can start your radiation therapy treatment on time, it's important that the forms at the back of this booklet are completed in full and returned to ARO as soon as possible, as delays in receiving these forms may result in a delay of the start of your treatment. Further copies of these forms can be found at <http://www.aro.co.nz>.

You may return the forms back to us by:

- Emailing reception@aro.co.nz
- Faxing the forms to 09 623 5767
- Or delivering them to us in person





Once your registration is complete, a member of our team will contact you with the time of your treatment planning (simulation) appointment if applicable to your personal cancer treatment plan. There is further detail about your simulation planning appointment in this folder.








Our commitment to you

- You will be welcomed as an individual, by a team that recognises that you have your own special needs and concerns.
- We will endeavour to provide you with treatment times that fit with your schedule.
- All of your treatments will be delivered in a welcoming, discreet and caring environment.
- Every aspect of your treatment will be given to the highest standard of clinical skill, from a team including experienced radiation oncologists (RO), radiation therapists (RT) and physicists who constantly strive to exceed expectations.
- We have patient care specialists (registered nurses and radiation therapists) on site that will address any concerns you may have about treatment side-effects, and they are available throughout the treatment process.
- Support from dietitians is also available to those patients who require it.
- The emotional and psychological effects of cancer can be overwhelming. Please contact us if you would like support from trained professionals.

Facilities at ARO:

-  Free parking on-site
-  Free Wi-Fi
-  3 Linear Accelerator bunkers
-  Consulting rooms with ensuite examination rooms

Other onsite facilities:

-  Café 98
-  Laboratory
-  Pharmacy
-  Mercy Radiology
-  Canopy Cancer Care



Usual treatment pathway

1

FIRST SPECIALIST APPOINTMENT

2

ORIENTATION

3

SIMULATION

4

FIRST DAY OF TREATMENT

5

DURING TREATMENT

6

LAST WEEK OF TREATMENT

7

FOLLOWING TREATMENT



1 First specialist appointment

At the first specialist appointment you will meet with your specialist radiation oncologist to discuss the proposed radiotherapy treatment approach and answer any questions and concerns you may have.

Should you decide to proceed with treatment at Auckland Radiation Oncology (ARO) it will be important to send us the completed patient registration and patient health history forms at the back of this booklet as soon as possible to avoid possible delay of treatment.

2 Orientation

At the orientation appointment a patient care specialist (nurse or radiation therapist) will explain the procedures in more detail and answer any concerns that you might have about ARO or your treatment.

3 Simulation

Before starting treatment, you will attend a simulation appointment to work out the optimal body position for receiving treatment and provide a detailed picture of the area to be treated.

Specific instructions relating to this appointment can be found at the back of the booklet.

During the days following your orientation and simulation appointment our team of experts (physicists, radiation therapist planners and your radiation oncologist) work together to develop the ideal treatment plan for you. This involves a highly sophisticated planning software system and review process to guarantee safe and effective delivery of treatment. Depending on the site and complexity of the treatment, this stage can take up to two weeks and in some cases longer.



4 First day of treatment

You'll need to arrive 10-15 minutes before your allocated treatment time so that we can greet you and to give you time to get changed for your treatment. Please bring an extra layer of clothing (e.g. cardigan or jacket) just in case you feel cold while you wait in the treatment reception area.

If you are driving, we recommend you enter the Mercy Hospital main entrance, 98 Mountain Road and park on level 1 of the car park. There is a drop off zone on level 1. Please do not enter your licence plate number into the parking machine, as you will be charged. To be eligible for free parking please provide your registration number at the ARO reception and we will validate your parking. Please walk across the link bridge to Auckland Radiation Oncology (ARO) and report to the ARO reception desk.

The radiation therapy itself is non-invasive and painless, and should take only 10-15 minutes to deliver. Sometimes this can take longer if there is a complex set-up required as for those patients requiring treatment to the head and neck area. Please allow 30-60 minutes for each scheduled treatment visit.

Your specific treatment type will be explained to you by a radiation therapist (RT) on your first day of treatment.



5 During treatment

Weekly reviews with your radiation oncologist or one of our patient care specialists will be conducted to monitor any side effects and provide on-going support and advice as required.

Patient Education Session

Early in your treatment, we will arrange for you to meet with our patient education specialist. We will discuss your treatment plan, explain how the radiation is being applied and possible side effects.

Patients have told us these sessions are very valuable and we encourage you to bring a friend or family member along with you. This is an ideal opportunity to ask any questions.

Remember that our team are available at any time to answer questions or concerns that you may have about your treatment or possible side effects, and if required, the patient care specialists on site can usually see you shortly after you finish treatment for the day.

More information and answers to frequently asked questions are available on page 9 or www.aro.co.nz. If you have questions or concerns contact us on 09 623 6585 or email aronurses@aro.co.nz and we will reply to you within one working day (Monday – Friday).




6 Last week of treatment

An appointment will be scheduled for you to meet with a member of our patient care team to ensure appropriate care is organised after your last treatment visit. This may include regular monitoring of blood results, appointments for dressings and management of side effects.

7 After treatment

Usually 2-6 weeks after your last treatment visit you will meet with your radiation oncologist or the doctor that referred you to ARO. Your GP will also be sent a report about your treatment and will continue to provide for your general health needs.

You are welcome to contact our patient care team to answer questions or concerns that you may have about your treatment or possible side effects up to 2 weeks following your last treatment visit.



Please telephone our nurses on 09 623 6585, email aronurses@aro.co.nz or make an appointment during business hours. Should you require support after 2 weeks, please contact the ARO Specialist Centre on phone 09 623 6587 or email specialistcentre@aro.co.nz.

For all other health concerns, please contact your GP, usual healthcare provider or local emergency facility.

Side Effects

The peak of any side effects experienced may occur around 7 to 14 days after the completion of your radiation therapy. This is due to the cumulative nature of the treatment.

Most side effects only last a few weeks but some of the effects, such as tiredness, may last for a couple of months after the end of your treatment. However, you should gradually start to feel like yourself again.

Skin Care

For **two weeks** after completing treatment we advise that you continue with any special skin care instructions. Please also:

- Avoid direct sunlight on the treated area.
- Avoid hot pools until any skin reaction has completely healed.

The skin in the treatment area will always be more sensitive to the sun:

- Apply sun-block with a SPF of 30 or higher to any exposed, previously treated skin, if you are going to be out in the sun.
- If you have experienced a skin reaction do not apply sunscreen to the treated skin until it has completely healed.

Diet


If your diet has been modified during your radiation therapy treatment we recommend you gradually return to your normal eating habits after seven days, unless otherwise advised by your doctor.

Long Term Side Effects

Most people return to “normal” after completion of their treatment, but a few patients experience some long term side effects. These can develop gradually over several months or years and will be monitored by your specialist team.

Feedback

We value feedback, and are constantly striving to improve our care and service to patients. Once you have completed treatment we may ask you to fill out a short survey. However if at any time you wish to pass on a compliment or make a complaint please speak to one of our receptionists, or make a complaint in writing to the manager of radiation services who will discuss your concerns confidentially.



FAQ's

Should I bring a support person?

Having a friend or relative with you during your treatment can provide a great deal of comfort and support. We understand just how important this is, and welcome you to have someone with you wherever possible. We make every effort to care not only for you, but also your support people and family/whanau. From welcoming them into ARO, to providing them with the information they need, we will help them to play a full role in your treatment journey.

If you have a larger support group, of more than 2 people, we ask that you call us ahead of time, as there is limited seating at ARO and we'd like to ensure that everyone is as comfortable as possible.

What are my rights as a patient?

All patients and their families have rights governed by the Health and Disability Commissioners Code of Health and Disability Services Consumers' Rights Regulation 1996. Auckland Radiation Oncology is committed to delivering your care in accordance with this. More detail on these regulations can be found at www.hdc.org.nz including a translation of these rights into several languages.

Can I drive?

Under most circumstances there is no problem with driving yourself to and from treatment appointments. Your radiation oncologist will advise you if it's unwise to do so.

What about my safety?

To facilitate safe and effective delivery of treatment, positioning and holding methods will be used. Lifts and wheelchairs are available for those patients who require them.

The Patient Health History form includes questions relating to your physical status. Please let us know if you need extra assistance so that we can plan your care safely.

Are you Smoke Free?

To ensure the health and safety of our employees and patients, and in accordance with the Smoke-free environment act, Auckland Radiation Oncology is smoke free.

Am I radioactive when I receive treatment?

No, the radiation you receive is electrically generated and is similar to having an x-ray. Small doses of radiation are administered daily over a period ranging from several days to several weeks. Your body does not continue to hold the radiation after the daily therapy session ends. You may continue to have normal contact with others.

How do I know if the treatment has worked?

Your specialist team, which could consist of your surgeon, medical oncologist and radiation oncologist, will continue to see you in follow-up appointments for the weeks, months and years following your course of radiation therapy. They will take careful note of your condition, using clinical examinations and diagnostic tests, to determine how well you are doing. At some point they will either discharge you from their care or offer you further treatment options, depending on your progress.

Where can I find more information?

In the first instance, we recommend you visit our website www.aro.co.nz.

Our team is available at any time to answer questions or concerns that you may have about your treatment or possible side effects. You are welcome to contact our patient care specialists on phone 09 623 6585 or email aronurses@aro.co.nz or to make an appointment.

Am I able to have more than one course of treatment of radiotherapy?

This is possible under some circumstances and depends on whether or not we are treating the same area as previously and what the total dose was to that area. This would be discussed with you by your radiation oncologist should the need arise.

What are your payment arrangements?

We will provide you with an indication of the costs of your radiation therapy once we have received detail of your expected treatment course.

In most cases we will facilitate the prior approval of your radiation treatment directly with your health insurance provider.

If you are a self-paying patient, prior to starting radiation therapy you will be required to pay the estimated cost of treatment in full. Eftpos, Mastercard and Visa credit card facilities are accepted. We're unable to give change for cash payments as we do not hold cash on site.

Parking

Free parking is available onsite in the Mercy Hospital carpark building for ARO patients.

The Mercy Hospital car park is through the main entrance off Mountain Road and you may park in any undesignated or ARO designated car park on level 1. To be eligible for free parking, you must provide your vehicle registration number at the ARO reception, so your parking can be validated.

Please do not enter your licence plate number into the parking machine in the carpark, as you will be charged. The Mercy Hospital parking is managed by a separate company, and a fine may be issued if your vehicle breaches any of the parking terms and conditions. Free parking (120 minutes) is also available nearby on Mountain Road, Gilgit Road and Almorah Road.



Where we are



	AUCKLAND RADIATION ONCOLOGY		AUCKLAND RADIATION ONCOLOGY <i>Driving Excellence</i>		MERCY SPECIALIST CENTRE
	MERCY RADIOLOGY				CAFE
	MERCY PHARMACY				PARKING
	MERCY HOSPITAL RECEPTION				MERCY HOSPITAL CAR PARK (Use link bridge off upper level to access ARO)

Finding us

A drop off zone is available in the level 1 car park. A short walk along the link bridge leads you from the parking building into the Mercy Hospital building, where you turn right up the short flight of stairs to ARO. There is a lift available if you do not wish to use the stairs.

My Treatment Notes

Special instructions

Medication updates



Useful information for staff

e.g. I have poor eyesight in my right eye, I am claustrophobic, I am hard of hearing in my left ear etc.

My questions



Full Legal Name:

(Last Name)

(First Name)

NHI:

DOB:

Gender:

PATIENT REGISTRATION FORM

Date: / /

Title: (please circle) Mr Mrs Ms Miss Dr Other Preferred Name:

NZ Residential Address:

NZ Postal Address: (if different from above)

NZ Phone: Home: () NZ Work: () NZ Mobile: ()

Occupation: Email:

Marital Status: Ethnic Group:

NZ RESIDENT: Y N Country of Birth:

Do you require an interpreter: Y N Language:

If visiting from overseas, home address in country of residence:

Phone: Home: () Mobile: ()

Emergency Contact Person / Next of Kin

Name:

Gender (please circle): Male Female Relationship to Patient:

Residential Address:

Phone: Home: () Work: () Mobile: ()

Alternative Contact Person / Next of Kin

Name:

Gender (please circle): Male Female Relationship to Patient:

Residential Address:

Phone: Home: () Work: () Mobile: ()

Family Doctor

Doctors Name:

Medical Centre Address: Post Code:

Phone: () Fax: ()



Full Legal Name:

(Last Name)

(First Name)

NHI:

DOB:

ARO

Radiation Oncologist: _____

Have you been a patient at ARO before?:

Y – Year:

N

Payment Details

How will your treatment be paid for? (tick and complete as many as apply)

1. Health Insurance

Name of Health Insurer: _____

Policy Type: _____

Membership No.: _____

2. Other (ie. Self Funding/Government Agency) Details:

3. Payment will be made by: credit card cheque cash
EFTPOS other: _____

- If you have no insurance, you will be required to pay a deposit equivalent to the estimated cost of the treatment course. We strongly recommend you contact ARO for an estimate of costs.
- I understand and give consent that relevant information may be supplied to an external credit reporting agency to obtain a credit report.
- I agree I am responsible and will pay for all costs incurred in connection with my treatment.
- I understand that ARO may notify a credit reporting agency and/or instruct a debt collection agency should I default on any payment due by me to ARO.
- I understand that any collection and/or legal costs incurred in recovering any debt will be charged to me.

Personal Property

- I understand and agree that ARO is not, and will not, be responsible for loss of or damage to any personal property (including jewellery, dentures, watches, rings, glasses) which I may bring to the centre.

Privacy Information

- I consent to ARO sharing relevant information that is related to my healthcare and as required by third parties such as Health Insurers, Medical Specialists, ACC and for quality and audit purposes.
- To the best of my knowledge the information I have supplied to ARO is correct.

Print name in full: _____

Signed: _____

Date: / /

If not the patient, state relationship to patient: _____



Name:

(Last Name)

(First Name)

NHI:

(Do you suffer from or have you ever had any of the following?) Please answer all the questions

10 Hepatitis A [] Hepatitis B [] Hepatitis C [] Yellow Jaundice [] HIV []

11 Hiatus Hernia [] Heartburn [] Acid Reflux []

12 High blood pressure? Y [] N []

If Yes, is this being monitored/treated by your GP?

13 Heart problems (eg. heart attack, angina, irregular pulse, fluid on lungs, PACEMAKER, rheumatic fever, palpitations, fainting, murmur, endocarditis)? Y [] N []

If Yes, please list:

14 A stroke (eg. CVA, or TIA)? Y [] N []

15 Blood clots to legs or lungs? Y [] N []

16 Blood disorders: (eg. anaemia, Von Willebrands disease)? Y [] N []

If Yes, please explain:

17 Lung problems (eg. asthma, recent bronchitis, emphysema, TB)? Y [] N []

18 Arthritis? Y [] N []

19 Fits or seizures (eg. epilepsy)? Y [] N []

If Yes, when was your last seizure?

20 Diabetes? Y [] N []

If Yes, what treatment are you on? Diet [] Tablets [] Insulin []

21 Are you, or could you, be pregnant? Y [] N []

22 Have you had any joint replacement surgery? Y [] N []

If Yes, which joints:

23 Any other medical conditions? Y [] N []

If Yes, please specify:

Discharge Planning

24 Do you live alone? Y [] N []

25 Do you have caring responsibilities for others at home? Y [] N []

26 Would you like to be given information about cancer support services? Y [] N []



Name: _____
(Last Name) (First Name)

NHI: _____ DOB: _____

Gender: _____

RADIATION THERAPY BOOKING SHEET

Date: / /

Address: _____

Phone: _____ Mobile: _____ Email: _____

Insurers: _____ Policy Type: _____ Number: _____

Diagnosis: _____

Prev Tmt: Y N Where: _____ Rad Onc: _____

Category: _____ Expected RT Start: / / Surgery Date: / /

A - Urgent 24 hours **D - Post Hormones** _____ Months Hormones

B - Curative 2 weeks **D - Post Chemo** Med Onc: _____

C - Curative 2-4 weeks Chemo Regime: _____

C - Palliative 2-14 days **Concurrent Chemo** Med Onc: _____

Expected Prescription: _____ Gray in: _____ Fractions over: _____ weeks: _____

Treatment Site

- Brain
- H&N Site: _____
- Oesophagus
- Lung
- Breast Rt Lt
- SCF
- Axilla
- + Electron boost
- Prostate
- Rectum
- Anal Canal
- Gynae Site: _____
- Other: _____

Technique

- Stereotactic
- VMAT / IMRT
- 3D CRT
- Tangents
- POP (AP/PA or Lats)
- Single direct field
- Electron V.Sim
- Electron MU Only
- CT No CT
- Other: _____

Pre Treatment Requirements

- Full Bladder Empty Bladder
- Planning MR / PET
- Empty Stomach
- Bolus for CT
- Anal Marker
- Introital Marker
- Tampon
- Oral Contrast: to show _____
- IV Contrast: to show _____
- 4D CT
- Other: _____
- Patient to Bring to Sim: _____

Pacemaker Prosthetic Hip Diagnostic CT / MR / PET Fusion Req

Pre-treatment fiducials required (prostate) Urologist: _____

Site Specific Info given? Y N Date: / /

Consent Form completed? Y N ARO Forms given? Y N



Street Address:

98 Mountain Road
Epsom, Auckland

Website:

www.aro.co.nz

Ph: 09 623 6046

Fax: 09 623 6586

Email: info@aro.co.nz



AUCKLAND
RADIATION
ONCOLOGY

A partnership
between MercyAscot
and Southern Cross
Healthcare

Driving Excellence

