

Memorial Sloan Kettering
Department of Nursing
presents

APHON

Pediatric Chemotherapy and Biotherapy Provider Course

March 3 – 4, 2016

REGISTRATION INFORMATION

Registration will **not** be processed without payment. All registered participants will receive a confirmation email with location and time of program.

COURSE FEE \$400.00

Includes course materials, copy of the *Pediatric Chemotherapy and Biotherapy Curriculum, 3rd Ed.*, and CNE credits.

TARGET AUDIENCE

Participants must be licensed registered nurses. This course content is appropriate for nurses who are new to pediatric and adolescent chemotherapy and bio-therapy administration, as well as for those who want a comprehensive review.

CONTINUING EDUCATION CREDIT

The Association of Pediatric Hematology / Oncology Nurses (APHON) is accredited as a provider of continuing education by the American Nurses Credentialing Center's Commission on Accreditation.

13.75 contact hours will be awarded. We urge you to be aware of the continuing education requirements of your own state board of nursing, especially for those states in which CE is mandatory.

ADDITIONAL INFORMATION

The APHON Pediatric Chemotherapy and Biotherapy Course is **NOT** a certification course, and is not intended to measure competency. Individual institutions are responsible for determining their own requirements for assessing clinical competency.

This program contains discussion of off-label uses (products used for a purpose other than that for which it was approved by the FDA). All disclosures will be mentioned at the beginning of the course.

REFUND POLICY

A\$50 administrative fee will be charged for all refunds. No refunds after February 19, 2016

FACULTY

Kleoniki Diamantis, RN, CFNP, CPON
Family Nurse Practitioner
Pediatric Oncology

Mindy Jaffe, RN, MSN, CPNP, CPON
Pediatric Nurse Practitioner
Pediatric Oncology

Maria Cristina Pinero, BSN, RN, CPHON
Clinical Nurse III
Pediatric Oncology

FOR ADDITIONAL INFORMATION CONTACT

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Memorial Sloan Kettering
Cancer Center



ASSOCIATION of PEDIATRIC
HEMATOLOGY/ONCOLOGY NURSES

GENERAL INSTRUCTIONS

The Association of Pediatric Hematology/ Oncology Nurses (APHON) Pediatric Chemotherapy and Biotherapy Provider Course provides a comprehensive review of the knowledge needed to administer cytotoxic and biotherapeutic agents.

Upon successful completion of the course, online post-test and online evaluation, participants will receive an APHON Pediatric Chemotherapy and Biotherapy Provider Card. This card validates that the participant has completed the education and demonstrated the knowledge needed to administer chemotherapy and biotherapy agents to pediatric patients.

It is the responsibility of the participant to ensure their provider status is renewed with APHON every 2 years on or before the provider card expiration. Information regarding online renewal process is found on the APHON website at www.aphon.org.

COURSE OBJECTIVES

Upon completion of the course, the participant will be able to:

1. Establish education and practice standards for the administration of chemotherapy and biotherapy to children and adolescents.
2. Promote consistent practices in the administration of chemotherapy and biotherapy to pediatric and adolescent patients.
3. Describe the characteristics of the cancer cell.
4. Identify differences between cancers in adults and cancers in children.
5. List cancer treatment modalities and how response is measured.
6. Discuss the history of chemotherapy.
7. Describe the development of the specialty in childhood cancer treatment.
8. Identify principles for cancer research and informed consent and the role of the nurse.
9. Describe important principles of pharmacokinetics in chemotherapy administration.
10. Discuss classes of chemotherapeutic agents.
11. Define combination chemotherapy.
12. List modes of chemotherapy delivery.
13. Identify biotherapeutic agents.
14. Describe indications and actions of commonly used medications.
15. Identify side effects and nursing interventions for specific biotherapy agents.
16. Recognize classifications for chemotherapeutic agents.
17. Identify common side effects for individual medications.

18. Describe nursing interventions for chemotherapy medications.
19. Describe the occupational exposure risks of chemotherapy/ biotherapy.
20. List components of safe handling and disposal practices.
21. Identify components of personal protection equipment.
22. Identify components of pretreatment assessment.
23. List steps in preparation of chemotherapy.
24. Identify nursing measures for different routes of administration.
25. Describe special considerations for vesicant chemotherapy.
26. Identify the type and management of allergic, anaphylactic, and hypersensitivity reactions.
27. Describe required family teaching prior to chemotherapy administration.
28. Identify common side effects of chemotherapy by organ systems.
29. Describe nursing assessment and interventions for common toxicities.
30. List expected medical interventions for each toxicity.
31. Define late effects.
32. Describe examples of late effects by body system.
33. Define quality of life for patients receiving chemotherapy.
34. Describe risk factors for adherence to therapy.
35. Identify unique concerns for adolescents and young adults.
36. Discuss how culture influences patient and family response to chemotherapy.
37. Describe the ethical principles associated with clinical trials.
38. Identify the nurse's role in informed consent.
39. Discuss legal issues related to chemotherapy administration.

PROGRAM CONTENT

1. Introduction and Standards
2. General Cancer Overview
3. Chemotherapy Overview
4. Principles of Chemotherapy
5. Principles of Biotherapy
6. Chemotherapy: Agents and Classifications
7. Safe Handling of Chemotherapy and Biotherapy Agents
8. Administration Considerations
9. Toxicity and Symptom Management
10. Late Effects of Chemotherapy
11. Psychosocial Issues
12. Ethical and Legal Considerations
13. Case Studies
14. Exam/Evaluations

REGISTRATION FORM

APHON Chemotherapy and Biotherapy Provider Course | March 3 – 4, 2016

NAME: _____ E-MAIL: _____

PREFERRED ADDRESS: _____

PREFERRED PHONE: _____

INSTITUTION: _____ RN LICENSE: _____

Please make checks payable to: Memorial Hospital, Department of Nursing.

Return to: Nursing Continuing Education Office, Box 10
Memorial Sloan Kettering Cancer Center
1275 York Avenue, New York, NY 10065

Registration Fee: \$400 **Deadline:** February 19, 2016 **Register online:** www.mskcc.org/education/cne

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