

Clinician Follow Up Reference for Supportive Care

Family/Caregiver Concerns –

“YES” to Concerns about my children

Start With Asking the patient the below questions	Approach	Next Step	Timing
<p>What are your specific concerns about your children?</p> <p>How old are your children?</p> <ul style="list-style-type: none"> If young, who is their primary caregiver? <p>Do they know about your illness? If so, what do they know?</p> <p>Are you too sick to care for your children?</p>	<p>If the children are not aware of the illness:</p> <ul style="list-style-type: none"> discuss the concerns about disclosing If wanted, develop or share a plan how to discuss with children, how their lives are being impacted and/or will be impacted. (See links below) <p>Is there an increase in problematic behaviors since learning about the illness? For example:</p> <ul style="list-style-type: none"> not enjoying what they typically have enjoyed prior to diagnosis? asking for repeated reassurances? clingier than before? changes in their sleep & appetite? Has their performance in school changed? <p>If exhibiting, document in patient EMR that states children are not coping well/displaying problematic behavior.</p> <p>If patient feels that they are too sick to care for their children, ask the patient if they need help with caregiving arrangements for their children.</p> <ul style="list-style-type: none"> How would you feel about sharing this concern with your family, friends, community groups or faith community as a way to seek support? <p>If there is a negative effect on the children’s schooling, suggest patient have a discussion with the teacher and/or school social worker.</p>	<p>Refer as applicable to: Child life specialist, counselor, social worker, cancer resource / support center resources or chaplains.</p> <ul style="list-style-type: none"> Can assist with family discussions May be able to assist with temporary caretaking resources Can offer additional help and support Can schedule an appointment for assessment with counselor or social worker if children are not coping well/displaying problematic behaviors <p>If the children are displaying problematic behaviors, a referral to family/child specific psychosocial services may be considered.</p> <p>Share Patient Links and Handouts as appropriate</p> <p>See Reference Link Below</p>	<p>Discuss same day if possible</p> <p>Acute – within 24 hours if interfering with care</p> <p>Routine - within 1 week if not interfering with care</p>

Notes

Stages I-III: Cancer Support Centers often have programs and services to help families. See Reference links below for information on how to talk to children about a loved one’s cancer.

Stage IV: For single parents proper legal paperwork is need to determine custody plans for children under the age of 18 for when a parent is no longer able to care for the children. Patients may need help in securing legal assistance.

Patient Links and Handouts:

- [American Cancer Society, Helping Children When a Family Member Has Cancer](#)
- [Cancer.Net, Talking With Your Children](#)
- [Cancer.Net, Talking With Family and Friends](#)
- [NIH, Talking to Children about Your Cancer](#)
- [CancerCare, Helping Children Understand Cancer: Talking to Your Kids About Your Diagnosis](#)

CSOC Patient Handout can be accessed at:

<http://cancer-help.me/children>

References:

- [The ASCO Post, Helping Patients Talk to Their Children About Cancer, Paula K. Rauch, MD](#)
- [CANCERCare® Online Support Groups](#), share with patient/family/caregiver if clinician considers appropriate