# IN THE KNOW

The Inservice Club for Nursing Assistants

A Disease Process Module: Understanding Cancer

# Instructions for the Learner

We hope you enjoy this Inservice, prepared especially for nursing assistants like you. You work very hard, and we appreciate the effort you make to complete these educational materials. It shows your desire to continue learning and growing in your profession!

After finishing this inservice, you will be able to:

- Describe in general terms how cancer affects the body.
- Name at least three lifestyle choices people can make that help prevent cancer.
- Discuss how you can help clients manage the side effects of common cancer treatments.
- List and discuss the four leading types of cancer.
- Describe how you can help with the pain and emotional distress caused by cancer.



If you are studying the inservice on your own, please:

- Read through all the attached materials. You may find it useful to have a highlighting marker nearby as you read. Highlight any information that is new to you or that you feel is especially important.
- If you have questions about anything you read, please ask
- Take the quiz. Think about each statement and circle the best answer.
- Check with your supervisor for the right answers. You pass the quiz with at least eight correct answers! Print your name, write in the date, and then sign your name.
- Keep the inservice information for yourself, and turn in the quiz page to

\_\_\_\_\_ no later than \_\_\_\_\_\_.

#### **THANK YOU!**

# IN THE KNOW

#### The Inservice Club for Nursing Assistants

A Disease Process Module: Understanding Cancer

Overall, cancer is the number two

cancer leading the way. Chances

are you know someone who has

The most common form of cancer in <u>both</u> men and women is **skin cancer**. Most skin cancers are

killer of Americans, with lung

had some form of cancer.

easily detected and treated.



Did you know that the word "*cancer*" comes from the Latin word for "*crab*"? The disease is named for the way it seems to "invade" or creep into tissues and organs.

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# All About Cancer

Cancer can be difficult to talk about--or even to *think* about. But if you KNOW THE FACTS you can feel more comfortable about the topic and be helpful to your clients who are coping with cancer.



Cancer is really a name for a <u>group</u> of diseases caused by abnormal cell growth. Like a naughty child, theses cells don't "follow the rules" of normal cell growth. A cancer is usually described by the cell or organ it attacks.

#### The top 3 causes of cancer deaths among women are:

- Lung
- Breast
- Colorectal







The top 3 causes of

men are:

Lung

**Prostate** 

Colorectal

cancer deaths among



# First...See What You Already Know About Cancer!

Draw a line between the term and its correct definition. (This is for fun...don't worry about getting any wrong!)



1. Malignant	A. Removal of a tissue sample to test for the presence of cancer cells.
2. Tumor	B. Cancer that begins in the lining or covering of an organ.
3. Benign	C. A substance that causes cancer.
4. Metastasis	D. Cancerous.
	E. Not cancerous.
5. Carcinoma	F. An abnormal mass of tissue that may be "benign" or "malignant".
6. Chemotherapy	G. The spread of a cancer from the original site
7. Lymph node	to other organs—usually through the bloodstream.
8. Biopsy	H. Small, bean-shaped structures scattered throughout the body that filter bacteria and cancer cells from the bloodstream.
9. Carcinogen	I. Hair loss.
10.Alopecia	J. Treatment with anticancer drugs.

#### Now...What Do All These People Have In Common?

**Frank Zappa** (rock star)......**Telly Savalas** (star of "Kojak" on TV).....**Jack Benny** (comedian) **Desi Arnaz** (of "I Love Lucy")......**Humphrey Bogart** (movie actor).....**Nat King Cole** (singer) **Walt Disney** (animator)......**Sigmund Freud** (psychiatrist)......**Flip Wilson** (comedian) **Mo Howard** (one of the Three Stooges).....**Carl Wilson** (one of the Beach Boys) **R.J. Reynolds** (founder of R.J. Reynolds tobacco company)......**Sammy Davis, Jr.** (actor, singer) **Michael Landon** (*actor*)......**Gary Ormsby** (*race car driver*).....**Walter Payton** (*football hero*)

1:D, 2:F, 3:E, 4:G, 5:B, 6:J, 7:H, 8:A, 9:C, 10:I and They all died of cancer.

PAGE 2

# **Cancer Treatment**

## What is Chemotherapy?

- The definition of chemotherapy is "the use of medicines to treat disease".
- **Cancer** chemotherapy is sometimes called "chemo".



- "Chemo" is used to kill cancer cells that have metastasized throughout the body—meaning they have moved away from the original site of the cancer.
- Chemotherapy may be given by mouth, through an IV, or sometimes directly into an organ or tumor.
- Unfortunately, chemo doesn't just kill cancer cells. It also affects any healthy cells that tend to grow quickly—such as hair cells, blood cells and the cells of the GI tract. This causes such side effects as alopecia, infection, bleeding and digestive problems.



The Bottom Line: Clients who are receiving chemotherapy need TLC... tender loving care!

#### How Can You Help a Client Who Is **Receiving Chemotherapy?**

- Don't assume that every client will have severe side effects from treatment—some people don't. (Although worrying about the effects of "chemo" can make the situation worse.)
- Chemotherapy weakens a person's ability to fight off infection. Remember that **handwashing** is the best way to stop the spread of germs! In addition, your client may be told to wear a mask when among a crowd of people. IMPORTANT: If you feel sick, wear a mask and gloves...or don't work with clients on chemo!
- Skin problems may occur so provide a bath or encourage the client to bathe daily, using mild soap and lotions.
- The nails require extra attention as they may darken or become brittle. Follow your workplace policy regarding nail care.
- Use only *electric* shavers to avoid bleeding and/or infection.
- Hair care should be done delicately. Use only mild shampoos and soft brushes. Gently towel dry the hair—avoid using a hair dryer.
- Mouth care is *extremely* important during chemotherapy. Soft toothbrushes help prevent gum damage. Keeping the mouth moist may be a challenge. Try offering lollipops, ice chips and Popsicles.



Nausea and vomiting can be a problem during treatment. (See page 9.)

# Cancer Treatment, continued.

## What About Radiation Therapy?



• Radiation therapy uses X-rays or "Gamma Rays" to destroy cancer cells.

• It can be given from **outside** the body or **implants** may be used to administer radiation near the tumor—such as within the uterus or near the prostate gland.

In addition to needing rest and a balanced diet, *radiation therapy* presents some special care concerns:

• The client's skin may be marked with ink for treatment. Do not disturb this mark unless told to do so by your supervisor.

- The treatment area may be *very* sensitive to touch. Keep it clean and dry—using only those soaps and lotions that have been approved by the doctor. Use only clear, lukewarm water since hot or cold water may damage the sensitive skin at the radiation site.
- Remember: the patient receiving *external* radiation treatment is **NOT** radioactive.
- The client receiving *internal* treatment may emit a very low level of radiation. Refer to your workplace policy regarding this treatment and follow it carefully to protect yourself, your client and his/ her family.



# **Cancer Prevention**

Remember...<u>at least 50% of all cancers can be prevented by a healthy lifestyle</u>. Stay healthy yourself and help your clients prevent cancer by following these cancer prevention guidelines:

- **Exercise** for 30 minutes every day. (Regular exercise reduces the risk of cancer by 30%!)
- Eat a healthy diet that is low in fat and red meat, high in fiber and fresh fruits and vegetables.
- Stay away from all tobacco products!
- Limit alcoholic beverages to one drink a day (or less).
- Get regular screening exams such as mammograms, rectal exams and Pap smears.
- Use a **sunscreen** (with SPF of 15 or higher) on the skin. Avoid the sun in the middle of the day.
- Report the first **warning signs** of cancer which include:
  - Blood in the urine.
  - Lumps in the breast.
  - Vaginal bleeding between menstrual cycles.
  - Rectal bleeding or blood in the stool.
  - Skin that bruises easily or sores that never heal.
  - Moles that change color, size or appearance.
  - A cough that won't go away.
  - Loss of weight without dieting.





# Spotlight on Lung Cancer

# First, Some Statistics:

- Lung cancer is the *leading* cause of cancer death in the United States.
- The American Cancer Society reports that more people die of lung cancer than colon, breast and prostate cancer combined.



- If caught before it *metastasizes*, there is a 42% chance of surviving more than 5 years.
- Most lung cancers are not found until they spread and once that happens, the survival rate is only 14%.

### **Anatomy & Physiology Review**

The lungs take in *oxygen* and get rid of *carbon dioxide*. The lining of the chest cavity which surrounds the lungs is called the *pleura*. The windpipe or *trachea* branches into two tubes called *bronchi* and then into smaller *bronchioles*. At the ends of the bronchioles are *alveoli* or air sacs.

## More Lung Cancer Facts:

- Most lung cancers start in the bronchi.
- Lung cancer often takes *years* to develop.
- More than 8 out of 10 lung cancers are caused by <u>smoking</u>.
- Lung tissue can return to normal if someone stops smoking *before* cancer develops.



# Treatment for Lung Cancer:

Sometimes **surgery** is done to remove a <u>section</u> of the lung (*lobectomy*) or the <u>entire</u> lung (*pneumonectomy*). People whose lungs are in otherwise good condition can eventually return to a normal activity level. But, people with other heart or lung conditions may have difficulty making up for the loss.

**Radiation therapy** is often used when surgery is not possible. However, this treatment <u>destroys</u> lung tissue and can affect the person's breathing.



*Chemotherapy* may be given alone or in addition to surgery and/or radiation.

# **Care Tips for Lung Cancer Clients:**

You can help people with impaired breathing by providing the following:

- Smaller, more frequent meals.
- An environment that's easy to get around in—with personal items within easy reach.
- Careful positioning to encourage full use of lung capacity (sitting up , or elevating head of bed).
- Protection from infection—even a "cold" can develop into a serious infection. Remind visitors and other staff of this risk.
- Extra oxygen. Refer to your workplace policy for oxygen use. Be alert to the safety issues created by oxygen administration.

## Remember... Lung cancer is a devastating disease that is *not* easily cured.

# Spotlight on Breast Cancer

### First, Some Statistics:

- More women die from lung cancer than from breast cancer. But, breast cancer is the most <u>common</u> cancer in women.
- The National Cancer Institute estimates that one out of every eight American women will get breast cancer.
- Breast cancer is not necessarily a "death sentence". Overall, the chance of surviving breast cancer for longer than five years is 80%.



 Remember...men can get breast cancer, too!

## **Treatment for Breast Cancer:**

Surgery is used in most cases.

• A *lumpectomy* removes the tumor and a little extra tissue.



- A *mastectomy* removes the breast, or part of the breast. Some lymph nodes from under the arm may be removed as well to check for spread of the cancer.
- Sometimes a woman may have *reconstructive* or implant surgery to improve the appearance of the surgical site.

**Chemotherapy** or **Radiation therapy** may be used in addition to surgery.

*Hormone therapy* may be used. Some cancer cells are more likely to grow when the female hormone estrogen is present. An "estrogen blocking" drug may be given to discourage cancer cell growth.

#### **Anatomy/Physiology Review**

Lobules are milk producing glands within the breast. Tubes that lead from the lobules to the nipple are called *ducts*. The rest of the breast is made up of fat, connective and lymph tissue. Most lymph nodes that connect to the breast are under the arm.

Cancers can form in <u>any</u> of these structures, but 80% of them start in a duct and invade the fatty breast tissue. This is known as *Infiltrating Ductal Carcinoma*.

## **Care Tips for Breast Cancer Clients:**

In addition to post-operative care, the woman with breast cancer has some special needs.

 Give extra attention to grooming. Breast surgery can affect how a woman feels about her body. Lending a hand to "do" her hair or help her with make-up may mean a great deal.



- The <u>affected</u> side of her body is more vulnerable to infection due to decreased lymph flow. Any small cut, such as a paper cut, can cause an infection. Even many years "post-op", a woman must be careful with that arm/hand. Any swelling or change in sensation must be reported immediately.
- <u>Never</u> take a blood pressure on the side where a woman has had breast surgery!

# Spotlight on Prostate Cancer

# First, Some Statistics:

• Prostate cancer is the most *common* cancer among men—but lung cancer is deadlier.



- Prostate cancer is rare before age 50.
- Prostate cancer is usually slow growing. The American Cancer Society reports that if the cancer is found before it spreads to the tissue around the prostate, there is a <u>100%</u> survival rate of 5 years. This rate decreases to 31% if the cancer has metastasized.

# **Anatomy & Physiology Review**

The prostate is a walnut-sized organ just below the bladder and in front of the rectum. It manufactures the fluid in the semen that carries the sperm. The urethra runs through the prostate which is why some men have trouble urinating when this gland is swollen.

## More Prostate Cancer Facts:



• Prostate cancer can spread outside the prostate and into the surrounding organs. It can also spread to the lymphatic system and the bones.

• There are two ways to screen for prostate cancer: the PSA blood test and the digital rectal exam. Most cases of prostate cancer are found during a rectal exam.

## **Treatment for Prostate Cancer:**

- If the cancer is at an early stage and the client is elderly, the doctor may decide to just <u>watch</u> the progress of the disease. This is known as "Watchful Waiting".
- *Surgery* is usually done to remove the prostate. A *radical prostatectomy* can cause incontinence and/or nerve damage.
- Cryosurgery (freezing the tumor) may also be performed—it may damage nerves, too.
- Both internal and external *radiation* are also used to treat prostrate cancer.
- Sometimes, hormone therapy is used when the cancer has spread to other parts of the body. Male hormones are blocked since they can contribute to the cancer's spread.



• *Chemotherapy* is usually used at a <u>late</u> stage in the disease.

## **Special Care Concerns:**

- Incontinence may be a problem for some men after surgery for prostate cancer. They may have to wear incontinence pads. Help them as necessary and report any new problems with urination.
- Another major problem after prostate surgery is that many men have trouble achieving an erection. Maintain a "matter of fact", professional attitude if your client wants to talk about his sexual functioning.
- Men taking hormone therapy (estrogen) may retain fluid and develop enlarged breasts. Help him cope by being sensitive to his feelings about his changing body.

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# Spotlight on Colon & Rectal Cancer

# First, Some Statistics:

 Colon and rectal (colorectal) cancer is the 3rd most common cancer among men and women.



• The 5 year survival rate is <u>90%</u> if caught before

**the cancer spreads.** It decreases to 65% if cancer spreads to the lymph nodes. If it spreads to the liver or lungs, the survival rate is only 8%.



## **Anatomy & Physiology Review**

- The colon is about 5 feet long and is responsible for the final stages of digestion.
- Both the colon and the rectum are made up of several layers of tissue. Colorectal cancer starts on the <u>inner</u> layer. *Polyps* or little wart-like structures can form growing inward and can become cancerous over time.
- Cancerous tumors can grow inside and outside the colon wall. They can also *metastasize* to other parts of the body.



#### Treatment for Colon & Rectal Cancer:

 Surgery is the primary treatment for both colon and rectal cancer. Most often, the diseased section is cut out and the intestine is reconnected.



Sometimes there is a temporary *colostomy*. It is unusual for a person with colon cancer to have a permanent colostomy, given today's treatment options. A person with rectal cancer may require a permanent colostomy if <u>major</u> surgery has been done.

• Chemotherapy and radiation may also be used. Sometimes they are used to provide "palliative" treatment—this probably won't cure the client but may slow or halt the growth of any tumors that can't be surgically removed.

# Care Tips:

While changes in bowel function are important to report for *all* individuals, it is especially important for the clients who have colorectal cancer to be aware of any changes. Symptoms of concern are:

- Bloody or tarry stools.
- Diarrhea, constipation or narrowing of the stool that lasts more than a few days.
- Feeling the urge to have a bowel movement that is <u>not</u> relieved by doing so.
- Cramping and abdominal pain.
- Weakness and fatigue.
- Jaundice or yellowing of the skin or eyes.
- Decreased appetite.

(From the American Cancer Society)

# **Cancer & Nutrition**

Being treated for cancer is *stressful* for the body. Treatments such as chemotherapy and radiation can affect the fast growing cells of the digestive tract. Some clients may lose their taste for food, have nausea and vomiting, or develop diarrhea. Depression and fatigue can also interfere with proper nutrition. (*See pg 11-12.*)

For your clients with cancer, "good nutrition" means more than just a balanced diet. <u>The focus is on building and keeping up strength</u>. Of course if the client has restrictions due to other health problems, such as diabetes or high blood pressure, these must be taken into account when planning a diet.

There may be days when clients do not want to eat at all—pushing or nagging them usually won't help. Just encourage fluids and if the problem persists, inform your supervisor. Six to eight glasses of water a day is a good goal.



*Mouth problems* can occur. <u>Mouth sores and</u> <u>other irritations need to be checked by a doctor</u>. Soft, room temperature foods that are not acidic are usually best. Milkshakes and "instant breakfasts" may be soothing. Good oral care after meals and throughout the day is important.

#### Nausea & Vomiting

If your clients have trouble with nausea, vomiting and/or a decreased appetite:

- Report the problem to your supervisor! There are a number of medications that can be used to treat nausea and vomiting. If one kind of medication isn't working for your client, there may be a different one that the doctor can prescribe.
- Encourage your client to eat high protein and/or high calorie foods *when able*. Eggs, milkshakes and supplements like Ensure are examples.



- Offer <u>frequent</u> small snacks—during the time of day the clients feel their best. Keep nonperishable snacks at the bedside– this is a time when "crackers in bed" are OK!
  - Some foods that may be tolerated include:
    - Mashed potatoes, rice and noodles
    - Clear broths, light soups
    - Cream of wheat, oatmeal
    - Angel food cake
    - Puddings, custard, and milkshakes
    - Yogurt
    - Applesauce
    - Bananas
    - Crackers or pretzels



#### **Appearances count!**

Presenting food in an attractive fashion goes a long way to "excite" the appetite. Colorful napkins and placemats, or a

flower in a vase can make a difference. Soft music on the radio and an eating area free from odors can provide an "appetizing" atmosphere. If possible, try serving a meal outside or by a window.

#### **Fortified Milk**

This recipe boosts the calories and protein of milk.

- 1 Quart whole milk
- 1 Cup non-fat instant dry milk

Pour the quart of milk in a bowl and whisk in the dry milk. Refrigerate. Use as you would regular milk (such as in macaroni & cheese, pudding, mashed potatoes, cocoa and cream sauces.)

# Cancer & Nutrition, continued

#### If Diarrhea or Constipation Are a Problem....

Sometimes, pain medicines, anti-cancer treatments and a decreased fluid intake cause clients with cancer to develop *constipation*.

- Make sure the client is getting six to eight glasses of liquid per day. If a highfiber diet is allowed (in some types of cancer it is <u>not</u> recommended) then fresh and dried fruit, whole grain bread, beans and peas are good sources of fiber.
- Offer a warm drink to stimulate a bowel movement. Warm apple juice can be very effective.



• Encourage exercise if possible. Offer to walk with the client.

#### Diarrhea ...

...can quickly cause <u>dehydration</u>. Once again, fluids are in order. Clear liquids may be recommended for 12 hours or so, with a gradual return to starchy, bland foods. Milk products and fatty foods can make diarrhea worse. So, be sure to report any change in bowel function—especially diarrhea.

#### **Prevent Food-Related Infections!**

Often, people undergoing cancer treatment have less ability to fight infection. Many foods and food preparation areas carry bacteria that can cause problems for people with cancer.

#### If you prepare food for clients with cancer, follow these guidelines to prevent problems:

- Fruits and vegetables need careful washing and/or peeling. If a food can't be easily washed (like raspberries, for example), don't serve it.
- Scrub the skin of melons before cutting them open—otherwise the knife may carry germs from the melon skin into the fruit.
- Clean hands are <u>always</u> necessary—both for the person preparing the food and the person consuming it. (*Consider wearing gloves when preparing food.*)
- Meat should be thawed *in the refrigerator* and then cooked thoroughly.
- Avoid serving raw fish and shellfish.
- Use only pasteurized dairy products and fruit juices.
- Food preparation surfaces should be washable and be kept very clean!



# **Cancer-Related Pain & Fatigue**

- Unfortunately, the word "cancer" is often associated with the word "pain'. Studies have shown that most people with advanced cancer feel some kind of <u>severe</u> pain. This pain may be caused by surgery, infection, chemo, radiation or the cancer itself.
- The most common pain *caused by cancer* is bone pain—which develops when the disease spreads into the bones. It is often described as a deep, aching pain.



- The most common pain *caused by cancer treatment* comes from surgery. Sometimes this pain goes away after the client has healed from the surgery—and sometimes it doesn't.
- <u>The good news is that there are many new</u> <u>medications and techniques being used to control</u> <u>the pain associated with cancer</u>. According to the World Health Organization, over 90% of all cancer pain can be successfully treated. Remember... every client, *including someone with cancer*, has the right to feel relief from pain.

#### Medicine is only one part of pain relief. You can play a role in easing your client's discomfort, too.

- Remember that a clean, pleasant environment, a tasty meal, fresh sheets or a relaxing shampoo all contribute to pain relief.
- Sometimes quiet conversation or your presence in the room can be comforting.
- Other times, the distraction of a video or TV show might help your client forget the pain.
- Helping your client find a comfortable position plays a big role in easing cancer-related pain.

#### Remember...pain relief is crucial for your client's recovery and well being.



#### What Makes Fatigue Worse?

- Bed rest
- Missed meals
- Disturbed sleep
- Pain

**Fatigue....** is a common complaint for many individuals with cancer.

- As many as 90% of people with cancer have a problem with fatigue causing them to have feelings of weakness and exhaustion that just don't go away.
- Fatigue is thought to be caused by cancer treatments, (radiation, surgery and chemotherapy) and/or by the chemicals that some types of tumors release into the body.
- It's easy to confuse fatigue with depression. Remember that they are two different things (although a client can experience <u>both</u>).
- Exercise—when prescribed by the doctor—is probably the best medicine for fatigue, along with activities that take your clients' minds off of their symptoms.
- Complaints of *weakness, exhaustion* and *a general lack of energy* may persist long after cancer treatments have stopped. These symptoms should be reported so the client can be checked for any new health problem—and for depression.

# The Emotional Impact of Cancer

A diagnosis of cancer is frightening to everyone involved. It's important for you to be sensitive to the different reactions your clients—and their families—may have.

- How clients respond to cancer may depend on their stage of life. For example, a 30- year-old mother of young children and an 85-year-old widow will probably react differently to a cancer diagnosis.
- Your clients may also have different emotions about their cancer depending on the expected outcome. For example, a man whose cancer can probably be cured and a man who has been given six months to live will probably have very different reactions.

Things that contribute to the emotional distress of people with cancer include:

- Experiencing changes in how they look (such as losing their hair, losing a breast or leg, etc.).
- Being afraid of pain or of dying alone.
- Losing the ability to have sex.
- Becoming dependent on others for basic functions (such as eating and bathing).
- Being unable to get out and see friends.

#### What You Can Do To Help:

- **Listen.** Listening is a powerful way to help them feel better.
- **Encourage self care.** Distressed individuals often lose interest in everyday activities—even if they are capable of performing them. They may welcome the opportunity to still "be in control".
- **Relieve their sense of isolation.** Attempt to get them involved with other people. Keep their door open if possible and/or encourage them to have visitors.
- Get them outside if they can go. Daylight will help relieve feelings of sadness. If they can't go out, open the curtains.
- **Talk to them.** Quiet conversation about everyday things can be very comforting.
- Report problems! Suicide is a possibility if they are depressed. Don't hesitate to report it if you suspect a client is considering suicide! Some warning signs include:
  - Talk of suicide.
  - Attempts to harm themselves.
  - Giving important possessions away.
  - A sudden change in mood (either positive *or* negative).

## There's More You Can Do:

To improve your ability to care for clients with cancer, consider learning more about:

- Communication, especially listening skills.
- The importance that nutrition and hydration has to a client's health.
- How to keep your clients from developing pressure sores.
- Caring for—and communicating with—people who are dying.
- What clinical depression is all about and how you can help.
- Pain management and what you can do to reduce your clients' pain.
- The connection between advance directives and client rights.

#### In the Know has inservices on all of the above topics. Check with your supervisor to see if these inservices are currently available at your workplace.





# Are You "In the Know" About Cancer?

#### Circle the best choice and then check your answers with your supervisor!

#### 1. Which of the following foods would be good to offer a cancer client who has diarrhea?

- A. Chicken broth
- B. Grilled cheese sandwich

#### 2. TRUE or FALSE

Patients who receive *external* radiation treatments are radioactive.

#### 3. TRUE or FALSE

Exercise prescribed by a doctor can help with "cancer fatigue".

#### 4. To help your clients prevent cancer, you should:

- A. Refuse to serve them red meat.
- B. Tell them to drink four glasses of water every day.

#### 5. The focus of nutrition for a person undergoing cancer treatment is:

- A. Weight loss.
- B. Lowering cholesterol.

C. Building and keeping up strength.

C. Serve only canned fruits and vegetables.

D. Encourage them to exercise every day.

D. Decreasing sugar intake.

C. French fries

D. Prunes

#### 6. TRUE or FALSE

Most lung cancer is caused by smoking.

#### 7. TRUE or FALSE

Chemotherapy always makes a person feel very sick.

#### 8. TRUE or FALSE

If a woman had a cancerous breast removed ten years ago, it doesn't matter which arm you use to take her blood pressure.

#### 9. TRUE or FALSE

It's normal for a person who has had colon cancer to have a little blood in his stool now and then.

#### 10. \_\_\_\_\_ Causes the most cancer deaths among <u>both</u> men and women.

A. Lung cancer	B. Colon Cancer		C. Skin Cancer
EMPLOYEE NAME		DATE	
l understand the information presented this inservice and answered at least eigh			
Employee Signature			Inservice Credit: 1 hour
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