Your health care team at City of Hope is here to help you if you have any questions or need to report any problems. Please contact your City of Hope location listed.

After 5 p.m., Monday through Friday, or weekends and holidays, calls will be answered by City of Hope's answering service, which will page the doctor on call.

City of Hope

1500 East Duarte Road Duarte, CA 91010 Phone: (800) 826-HOPE (4673)

24 Hour Care — Nursing Triage Call

Center: (626) 218-7133

City of Hope | Antelope Valley

44151 15th St. West Lancaster, CA 93534 Phone: (877) 828-3627

City of Hope | Arcadia

301 W. Huntington Drive, Suite 400 Arcadia, CA 91007 Phone: (626) 218-9840

City of Hope | Corona

1280 Corona Pointe Court, Suite 112 Corona, CA 92879 Phone: (951) 898-2828

City of Hope | Glendora

412 W. Carroll Ave., Suite 200 Glendora, CA 91741 Phone: (626) 218-0921

City of Hope | Mission Hills

15031 Rinaldi St. Mission Hills, CA 91345 Phone: (818) 660-4700

City of Hope | Palm Springs

1180 N. Indian Canvon Drive, E-218 Palm Springs, CA 92262 Phone: (760) 416-4832

City of Hope | Pasadena

630 S. Raymond Ave., Suite 220 Pasadena, CA 91105 Phone: (626) 218-9500

City of Hope | Santa Clarita

23823 Valencia Blvd., Suite 250 Santa Clarita, CA 91355 Phone: (661) 799-1999

City of Hope | Simi Valley

1157 Swallow Lane Simi Valley, CA 93065 Phone: (805) 527-2770

City of Hope | South Bay

5215 Torrance Blvd. Torrance, CA 90503 Phone: (310) 750-1715

City of Hope | South Pasadena

209 Fair Oaks Ave. South Pasadena, CA 91030 Phone: (877) 998-7546

City of Hope | Thousand Oaks

425 Haaland Drive, Suite 101 Thousand Oaks, CA 91361 Phone: (805) 496-2949

City of Hope | Upland

1100 San Bernardino Road, Suite 1100 Upland, CA 91786 Phone: (909) 949-2242

City of Hope | West Covina

1250 S. Sunset Ave., Suite 303 West Covina, CA 91790 Phone: (626) 856-5858

My doctor's name is

CITY OF HOPE POSTCHEMOTHERAPY/INFUSION

The doctors and nurses at City of Hope made this guide to help you after you get chemo. There are many types of medications and treatment plans, so this may not always apply to you. Please follow the advice of your health care team and talk with your doctor or nurse if you have any questions.

POSTCHEMOTHERAPY/ **INFUSION**





THESE INSTRUCTIONS WILL HELP YOU:

1. Understand the side effects of your chemotherapy or infusional therapy 2. Identify problems that should be reported to your doctor or nurse The booklet called Chemotherapy and You: A Guide to Self-help During **Treatment**, included in your teaching packet, has other useful tips on dealing with chemotherapy side effects. These are the chemotherapy drugs and/or infusions you were given during your treatment today: These are the medications to take at home to help you if you feel side effects:

As a result of the medications you were given, you may feel sleepy, dizzy or light-headed for 24 hours. Do not operate a car or any machinery during this time. We suggest someone stay with you for the first 24 hours to help you as needed.

Plan meals with plenty of protein, fruits and vegetables, unless your doctor has given you special diet instructions. Get extra rest during this time. Take naps or rest breaks during the day if needed. Try to stay away from persons who are sick with a cold or the flu.

Let your doctor or nurse know about any medications and new medications you are taking, other than the ones prescribed for you. This includes vitamins and herbal supplements.

Side effects that	you might have	e within the ne	xt seven day	VS
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Side effects that you might have	within the next seven days:
☐ Increased risk of infection	☐ Loss of appetite
☐ Increased risk of bleeding	☐ Fatigue
☐ Nausea and vomiting	☐ Skin and nail changes
☐ Diarrhea	☐ Hives and/or blotchy red skin
☐ Constipation	☐ Generalized itching
☐ Mouth sores	☐ Thinning of hair/hair loss
☐ Numbness or tingling in hands/feet	☐ Other
Follow the instructions from your doctor special precautions to take. These instruside effect. Call your doctor or nurse if you have	ictions will help reduce or stop the
• Pain	- a, o. a
• Shortness of breath (hard to breath	e)
• Hives, itching or red, flushed skin	
 Signs of infection: cough, sore throa pus-like drainage 	t, areas of redness and/or
• Temperature of more than 100.5° F	
 Bleeding gums, nosebleeds, easy br the urine 	uising of the skin or blood in
• Nausea and vomiting that is not reli	eved by your medications
• Severe diarrhea for more than 24 ho	ours
• A burning feeling when you urinate,	or cloudy, foul-smelling urine

NOTE: If you feel any of these symptoms 48 hours BEFORE your next clinic appointment, please let your nurse know when you check in.