

NYSNA Recommendations and Resources for Reopening during COVID-19
Oncology Settings: NYSNAs Nursing Education & Practice and Health & Safety Guidelines



Unit	Pre-Screening	Criteria for Testing	Unit Modifications	PPE	Cleaning	Visitor Access	RN to Patient Ratio
Oncology	<p>Delay non-urgent treatments.</p> <p>Use tele-health to decrease hospital and office visits.</p> <p>Triage patients before giving treatments with general screening questions.</p> <p>1 – 2 days prior to a patients visit.</p>	<p>PUI’s should be prioritized for testing.</p> <p>If patient presents with any of the following they should be tested:</p> <ul style="list-style-type: none"> • Cough • Sore throat • Chills • Repeated shaking with chills • Muscle pain • Headache • Loss of taste or smell • Contact with someone known to have COVID-19 • Fever of 100 F • Shortness of breath 	<p>Designated staff for patients with hematologic malignancies, blood and marrow transplants, neutropenia, treatment with immunosuppressive drugs.</p> <p>Generally COVID positive patients should delay cancer treatments but if needed, they should be treated in an isolation room and scheduled at the end of the day.</p> <p>Consider alternative dosing schedules to allow for fewer in person visits on the unit.</p> <p>If possible, switch from infusion therapy to oral oncolytics.</p> <p>Transition outpatient care to at home care whenever possible.</p>	<p>N95’s with eye protection, or higher, poly-coated gown, gloves double chemotherapy tested, shoe covers.</p> <p>For the patient: Surgical mask and gown.</p>	<p>Hand hygiene by using ABHR with 60-95% alcohol or washing hands with soap and water for at least 20 seconds.</p> <p>Use EPA registered hospital-grade disinfectants on frequently touched surfaces or objects.</p> <p>Laundry, food service utensils and medical waste should be performed in accordance with standards in infection control procedures.</p> <p>Neutropenic precautions.</p> <p>Clean all devices before and after treatment.</p>	<p>No visitors</p> <p>Remote technology and phone calls for patients to communicate with family and friends.</p>	<p>Nurses who are caring for neutropenic patients should not have contact with any patient who is PUI or positive for COVID. These nurses should not be floated to other units.</p> <p>Nurse to patient ratio 1:3</p>
	<p>Resources:</p> <p>https://www.ons.org/oncology-staff-assignments-covid-19</p> <p>https://www.targetedonc.com/view/the-nccn-shares-recommendations-for-the-safety-of-cancer-patients-during-the-covid19</p> <p>https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7177078</p> <p>https://www.oncnursingnews.com/publications/oncology-nurse/2012/june-2012/oncology-nurse-staffing-is-variable-and-multifactorial</p>						