**ORAL CHEMOTHERAPY PROGRAM ALGORITHM**

The most successful oral chemotherapy programs have developed a formal process that outlines the steps and staff responsible. Below is an example of one such flowchart.

1. Physicin orders oral anti-cancer agent and notifies nursing staff by completing and submitting oral chemotherapy order.

2. Physician obtains the patient’s informed consent using a chemotherapy and biotherapy consent form.

3. Physician or nurse sends oral chemotherapy order to pharmacy.

4. Financial specialist conducts benefits investigation and obtains pre-authorization, if needed. Meets with patient and caregiver(s) to go over treatment costs, including the patient's responsibility. If necessary, financial specialist helps patient and caregiver(s) identify an assistance program or refers patient and caregiver(s) to a social worker.

5. Pharmacist screens for drug/drug interactions by comparing the chemotherapy order to the patient’s medication record.

6. Nurse makes an education appointment for patient and his or her caregiver(s).

7. Nurse educates patient and caregiver(s) on oral chemotherapy medication, including safe handling procedures, and helps patient understand how to identify, manage, and report side effects. Nurse provides 24-hour contact information, ensuring patient questions are answered and problems are reported promptly.

8. Nurse gives prescription, printed education materials, and other tools, including pill boxes, personalized calendars, diaries, dosing cards, and/or alarms to patient and caregiver(s). Nurse instructs patient and caregiver(s) to bring medication bottles and calendars with them to each visit.

9. Scheduler places a note in the follow-up appointment screen or in the patient’s medical record as a trigger to remind patient to bring prescription bottles and calendars when scheduler calls or emails a reminder.

10. Nurse adds oral chemotherapy medication to the EHR and medication reconciliation sheet.

11. Nurse sends prescription bottles to pharmacy for pill counts at each visit to ensure patient adherence and as a trigger for patient and caregiver re-education if necessary.

12. Nurse conducts weekly follow-up phone calls to patient during the first month of treatment, and every other week during the second and third months of treatment.