Advanced Oncology Certified Nurse Practitioner

REVIEW COURSE 2024

October 10-12, 2024 | Houston, TX

MD Anderson Cancer Center

Making Cancer History®

Financial Disclosures: Pfizer advisory board

Evaluating Response to Treatment

- Imaging
- Tumor Markers/laboratory studies
- Clinical response

Imaging

- X Rays
- Computed tomography (CT)
- Magnetic resonance imaging (MRI)
- Positron-emission tomography (PET)

Breast

- Stage I-IIB
 - No additional imaging unless s/s
- Stage IIIA
 - CT or MRI based on s/s or labs
 - Annual mammogram
- Stage IV
 - CT CAP and bone scan

Colorectal Cancer

- Endoscopy
- CT chest, abdomen, pelvis (CAP)
- MRI for rectal cancer
- Monitor CEA

Lung Cancer

- •CT
- MRI spine or brain
- FDG PET for small cell

Non Hodgkin Lymphoma

- FDG PET for FDG avid lymphoma
- CT for non FDG avid lymphoma
- Bone scan
- Bone marrow bx
- Monitor "B" symptoms
 - Intermittent fevers, night sweats, weight loss

Ovarian Cancer

- Pelvic exam
- Pelvic ultrasound
- CT CAP
- •MRI AP
- CA-125

Prostate Cancer

- Digital rectal exam
- MRI pelvis
- CT CAP
- Bone scan
- PSMA PET scan
- PSA

Tumor marker	Cancer Type
CA 19-9	Pancreatic cancer Colon Cancer
Alpha feto protein (AFP)	Testicular Ovarian Hepatocellular
CEA	Colon cancer Possibly ovarian
PSA	Prostate
Thyroglobulin	Thyroid
CA 125	Ovarian Colon (esp if CEA and CA 19-9 are WNL)

NCCN, 2024 Celeste, 2023

Clinical Response

- Pain
- s/s related to the tumor
 - monitor urinary symptoms for prostate cancer
 - Hematuria/urinary symptoms for bladder cancer
 - Vaginal bleeding for uterine

Questions:

Mrs. Smith is a 57yro female with a pT2N1M0, triple negative breast cancer, who was treated with surgery, radiation and adjuvant systemic therapy. She presents to your clinic with worsening right rib pain. She is due for restaging scans in 8 weeks. What is the most appropriate action.

- 1) Order a CEA
- 2) Continue to monitor and evaluate scans in 8 weeks
- 3) Proceed with a PET scan
- 4) Ask for imaging to be done at a sooner date

Questions:

Mr. Thomas is a 64yro gentleman, with a localized prostate cancer, who was treated with hormone therapy + radiation therapy. His response to the therapy is best evaluated by which of the following:

- 1) PSA every 3-6 months
- 2) Repeat prostate biopsy
- 3) CT pelvis
- 4) FDG PET

Questions:

Ms. Violet is a 42yro female with a localized ovarian cancer, who presented with an elevated CA 125 at diagnosis. Her CEA and AFP were normal. What is the most appropriate tumor marker for monitoring response to treatment.

- 1) CA 125
- 2) CEA
- 3) AFP

References:

- Celeste, B. C. C. (Ed.). (2023). Advanced oncology nursing certification review and resource manual (third edition). Oncology Nursing Society.
- NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines®) for Guideline Name V.X.2024. © National Comprehensive Cancer Network, Inc. 2024. All rights reserved. Accessed [08/26/2024]. To view the most recent and complete version of the guideline, go online to NCCN.org.

Thank you!

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