

# Pacific Shores Medical Group

*A Hematology/Oncology Private Practice*

*Member, UCLA Affiliated Translational Oncology Research Network*



## Patient Information Booklet

[www.pacshoresoncology.com](http://www.pacshoresoncology.com)

Exclusive Property of Pacific Shores Medical Group



# Patient Information Booklet

My Name \_\_\_\_\_

*My Diagnosis*

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*My Treatment*

*Schedule*

- |          |       |
|----------|-------|
| 1. _____ | _____ |
| 2. _____ | _____ |
| 3. _____ | _____ |
| 4. _____ | _____ |
| 5. _____ | _____ |
| 6. _____ | _____ |
| 7. _____ | _____ |

*My Notes*

Write down any important information you want to keep,  
on pages 27 through 29 and pages 66 and 67.

*My Doctor's Name*

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# Welcome

## to Pacific Shores Medical Group

*We would like to provide you with information about some of our policies and procedures, as well as answers to some frequently asked medical questions. We trust that this booklet will help you receive the safest, most accurate, and highest quality of medical care.*



## Office Policies and Procedures

### Your Appointment

Each patient's scheduled appointment time is specific to the service required. Your appointment can include one or any combination of the following services

- Laboratory work
- Treatment
- Physician consultation
- Research visit

Patients may be scheduled for one appointment time but may receive different services. In case an emergent situation arises during clinic hours, our staff will do their very best to accommodate each patient's personal needs and scheduled appointment time. We appreciate your patience and understanding during these situations.

It is essential that you bring your appointment card (see sample below) to each visit. Please remember to schedule your appointments at the front desk.

**A date without a time is not a scheduled appointment.**

**Pacific Shores Medical Group  
Appointment Card**



Please get time at front desk before leaving the clinic.

Bring this card with you to each visit.

- Glendale (818) 637-7611
- Huntington Beach (714) 252-9415
- Long Beach (562) 590-0345
- Los Alamitos (562) 430-5900
- San Gabriel (626) 576-7321

Our scheduled appointments are computerized, and your appointment is entered into the computer at the front desk. Without this action, there is no scheduled appointment. Failure to follow these instructions may delay your treatment.

Your appointment date and time are inside the appointment card. Please come to your appointment at the designated scheduled time.

**Please remember to call ahead for same-day appointment.**

**We do not accept walk-in appointments.**

**Validated parking or reduced parking rates are available in most instances.**



## *Your Clinic Visit*

Please remember to bring with you the following

- Your current insurance card
- Always be prepared to pay your co-pay at the time of service, payment by cash, credit card, or check
- Your appointment card, which is essential to receive any of the services we provide

## *Rules and Regulations*

- We are an adult hematology/oncology practice; therefore, no children under the age of 18 are allowed
- Please! Do not use cell phones inside our office (this includes the waiting area), except for emergencies. Keep cell-phone use to an absolute minimum
- It is very important to notify the billing department at 562-590-0345 if you have any of the following changes
  - Address and phone number
  - Insurance coverage changes\*

*\*Please call prior to your appointment, to avoid delays.*

AS A COURTESY TO OUR PATIENTS,  
THE PSMG BILLING DEPARTMENT WILL  
SUBMIT YOUR MEDICAL BILL TO YOUR  
INSURANCE COMPANY FOR PAYMENT.  
ANY UNPAID BALANCE WILL BE YOUR  
RESPONSIBILITY.

## *Patient Care*

### **Medications**

Always carry an updated list of your current medications. It is essential for your safety that we keep updated current information about any and all medications you are taking, including any vitamins, herbs, alternative and complementary medicines.

### **Refills**

Have your pharmacist call us or fax a request for refills. Please **allow at least 72 hours** to refill prescriptions. Call ahead of time so you do not run out of medicine. Some medications, such as strong pain killers, may not be refilled over the phone, as they require written prescriptions. Do not wait until Friday to get your medication supply for the weekend. Get the prescription ahead of time, or during your visit with your doctor.





## *Emergency*

- If your problem is urgent, proceed to the hospital's emergency room, or call 911
- If you have an acute medical problem – such as fever, shaking chills, uncontrolled pain, bleeding, uncontrolled nausea and vomiting – you may need to go to the emergency room immediately, or call and ask to speak with your doctor
- If your call is of a less acute nature – such as a question about the schedule of medications to be taken, questions about your tests or upcoming treatments – **please leave a message in the nurse's voice mail.** Please inform the receptionist that you would like to leave a message with the nurse; the receptionist will direct your call so that you can leave your message, and the nurse will call you back
- For other calls, the front desk will assist and direct you appropriately
- Please keep in mind that, during office hours, our staff is taking care of patients while you are calling. We appreciate your patience and consideration



# Answers

## *to your questions about your care*

### *What foods should I eat during the therapy?*

Eat a light meal the morning and afternoon of your treatment. Avoid spicy or fatty foods. Please do not bring snacks that require refrigeration, microwaving, or are odorous (strong aromas can stimulate nausea and vomiting). Eat frequent small meals. Use dietary supplements to complement your diet, if needed. Ask the nurse or doctor if you would like to see the dietitian.

### *What about fluids?*

Unless otherwise indicated by your doctor, drink plenty of fluids the day before, the day of, and the day after you have chemotherapy. We suggest 10 to 15 (8-ounce) glasses of fluid (soda, water, or other beverage, soups, gelatin, watermelon, fruits). You may need to drink less fluid if you have a history of heart failure or swelling with water retention.

### *What should I know about mouth care?*

Maintain good oral hygiene. Gently floss and use a soft-bristled toothbrush. Use Biotène® mouthwash 2 or 3 times a day. If you are having radiation that affects your mouth area, you must see the dentist/oral surgeon before starting treatment.



### *Should I exercise or rest?*

Rest when you are tired. Do not pursue your normal activity levels and try to stay fit and physically active. Unless otherwise instructed by your doctor, most treatments will allow you to remain physically active; in turn, this

will maintain your strength and muscle mass. When possible, our exercise program and frequent brisk walking are highly recommended.

### *What should I wear during therapy?*

Wear comfortable, loose-fitting clothing with stretchable waistbands; no constricting jewelry. Please do not use perfume (patients or family members). Treatments may make your skin extremely sensitive to the sun; use a sunscreen and wear protective clothing, as needed.

### *What will I do when I arrive?*

We usually have TV, VCR and radio in the treatment areas. If you are here for a long chemotherapy session, you may bring a favorite video tape with you. There are also magazines and educational materials available. Bring any item needed for comfort, such as a favorite blanket or pillow.

One family member is encouraged to accompany the patient in the treatment area on the first day of their chemotherapy. During subsequent chemotherapy appointments, we request that adult family members wait in the reception/waiting room area.

Please limit the use of cell phones in the treatment area to an absolute minimum. For safety reasons, children are not allowed in the treatment area. An uncluttered treatment area provides a safer and more comfortable environment for patient care.

### *What side effects should I expect?*

Chemotherapy can cause a variety of side effects, including low blood counts, increased risk of infection, fatigue, hair loss, nausea, ovarian failure, premature menopause, and female or male sterility. The side effects vary with the drug(s) used, so please make sure you read the medication-specific printed information given to you.

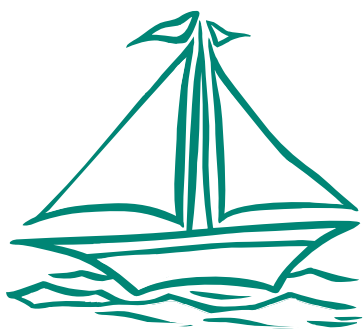
Follow your prescribed anti-nausea medication schedule and other instructions at home after treatment. Do not wait until you have nausea or vomiting to find out what to do. Take your nausea medication as instructed by your doctor and your nurse.

### *What signs and symptoms should I report immediately to the nurse or physician?*

Fevers over 100°F, chills, nausea/vomiting not improving with anti-nausea medication, diarrhea, mouth sores that impede drinking and eating, excessive bleeding from any site, sudden severe weakness, feeling suddenly cold and sick and unable to get warm.

### *What if I am pregnant?*

In general, it is recommended that patients **not** get pregnant during, and up to 2 years after, completion of chemotherapy, radiotherapy or other cancer treatments. The safety of chemotherapy and other drugs used in cancer therapy during pregnancy is generally not well known. You should not take any treatments if you are pregnant without checking with your doctor. Use appropriate contraception, if applicable, during therapy to avoid getting pregnant.



Chemotherapy  
can cause  
sterility in  
both men  
and women.

# General

## Medical Information

### *Anemia*

Anemia is a side effect experienced by more than 50% of patients undergoing chemotherapy. Chemotherapy reduces the bone marrow's ability to make red blood cells that carry oxygen to all parts of your body. When there are too few red blood cells, your body's tissues don't get enough oxygen to do their work. Anemia may make you look pale and feel fatigued, weak, tired, and dizzy. Anemia is treatable; your doctor and nurse will monitor your red cell count and take appropriate steps if it falls.

### *Bleeding Precautions*

If you have a low platelet count or you are taking a blood thinner (such as Coumadin® or aspirin), you may have an increased risk of bleeding or bruising. Avoid aspirin or aspirin-like medications, unless approved by your doctor. Notify the nurse or doctor of any excessive bleeding or abnormal bleeding from rectum, in urine, from mouth or nose, or any other site. You may notice easy bruising, so avoid trauma or falls, especially head trauma.

### *Communicating with your Nurses and Doctors*

If you have an acute medical problem, such as fever, shaking chills, uncontrolled pain, bleeding, uncontrollable nausea and vomiting or any condition that requires immediate attention, please call and ask to speak with the nurse or doctor immediately.

If you call after hours and do not receive a call back from the doctor in 15 minutes, please call again and inform the exchange. If your problem is urgent, proceed to the hospital's emergency room, or, call 911.

If your call is of a less acute nature, such as a question about the schedule of medications to be taken or questions about your tests or upcoming treatments, then we ask that you leave a message in the nurse's voice mail. The front desk will direct your call so that you can leave your message during the day and the nurse will call you back.

For all other calls, the front desk will assist and direct you appropriately.

Please keep in mind that during office hours, our staff is taking care of patients in the office while you are calling. We ask you to assist us in making our operations as efficient as possible so that everyone will be attended to efficiently and on time.

## *Constipation*

Some anticancer medicines, pain medicines, and other medicines can cause constipation. Constipation can also occur if you are less active or if your diet lacks enough fluid or fiber. If you have not had a bowel movement for more than a day or two and this is less than normal for you, call your doctor, who may suggest taking a laxative or stool softener.

## *What can I do about constipation?*

Drink plenty of fluids. If you do not have mouth sores, try warm and hot fluids, including water.

Check with your doctor to see if you can increase the fiber in your diet (there are certain kinds of cancers and side effects for which a high-fiber diet is not recommended). High-fiber foods include bran, whole-wheat breads and cereals, raw or cooked vegetables, fresh and dried fruit, nuts, and popcorn. Walking can be very helpful to prevent constipation, bloating, and excessive gas, especially after meals.

## *Depression*

Cancer may disrupt patients' lifestyles and threaten their emotional and physical well-being. This stress can often lead to depression. Please inform your doctor or nurse if you feel depressed. You can be helped.

## *Diarrhea*

When chemotherapy affects the cells lining the intestine, it can cause diarrhea (watery or loose stools). If you have diarrhea that continues for more than 24 hours, or if you have pain and cramping along with the diarrhea, call your doctor. In some instances, the doctor or nurse will instruct you to take medication immediately for any diarrhea. If diarrhea persists, you may need intravenous (IV) fluids to replace the water and nutrients you have lost. Often these fluids are given to you as an outpatient, and you do not require hospitalization. Do not take any over-the-counter medicines for diarrhea without asking your doctor.

## *How can I help control diarrhea?*

Drink more fluids to help replace those you have lost through diarrhea. Mild, clear liquids, such as water, clear broth, sports drinks such as Gatorade®, or ginger ale, are best. Drink slowly and make sure the drinks are at room temperature. Let carbonated drinks lose their fizz before you drink them. Eat small amounts of food throughout the day, instead of large meals. If you have nausea and are unable to take fluids by mouth, you may need intravenous fluids in the office to prevent severe dehydration.

Unless your doctor has told you otherwise, eat potassium-rich foods. Diarrhea can cause you to lose this important mineral. Bananas, oranges, potatoes, and peach and apricot nectars are good sources of potassium. The nurse can give you a list of other potassium-rich foods.



Ask your doctor if you should try a clear-liquid diet to give your bowel time to rest. A clear-liquid diet does not provide all the nutrients you need, so it is generally not indicated for more than 3 to 5 days.

Avoid hot or very cold liquids, which can make diarrhea worse. Avoid coffee, tea with caffeine, alcohol, and sweets. Stay away from fried, greasy, or highly spiced foods, as well as the skin of fruits. They are irritating and can cause diarrhea and cramping. The skin of chicken and turkey are to be avoided because they contain fat. Avoid milk and milk products, including ice cream, if they make your diarrhea worse.

Eat low-fiber foods. Low-fiber foods include white bread, white rice or noodles, cream cereals, ripe bananas, canned or cooked fruit without skins, eggs, mashed or baked potatoes without the skin, pureed vegetables, chicken, or turkey without the skin, and fish.



### *Fatigue (Tiredness)*

Report to your doctor or nurse if you have severe tiredness that interferes with your ability to do your normal activities.

Rest when you are tired. Do pursue your normal activity levels and try to stay fit and physically active. Unless otherwise instructed by your doctor, most treatments will allow you to remain physically active which, in turn, will maintain your strength and muscle mass. When possible, an exercise program and frequent brisk walking are highly recommended. If necessary, ask others to help you with household tasks such as cooking, cleaning and shopping.

## *Hair Loss*

Hair loss (alopecia) is a common side effect of chemotherapy, but not all drugs cause hair loss. Your doctor can tell you if hair loss might occur with the drug(s) you are taking. When hair loss does occur, the hair may become thinner or fall out entirely. Hair loss can occur on all parts of the body, including the head, face, arms, legs, underarms, and pubic area. The hair usually grows back after the treatments are over. Some people start to get their hair back while they are still having treatments. Sometimes, hair may grow back with a different color or texture.

Hair loss does not always happen right away. It may begin several weeks after the first treatment or after a few treatments. Many people indicate that their head becomes sensitive and the scalp tender before or during hair loss. Hair may fall out gradually or in clumps. Any hair that is still growing may become dull and dry.

## *Infection*

If you are on chemotherapy, you may be at an increased risk of infection. You need to watch for

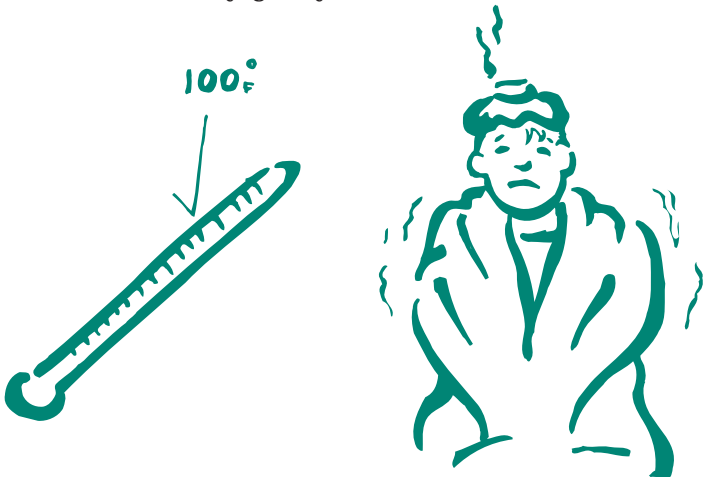
- Any fever over 100.4°F or 38°C
- Shaking chills, feeling suddenly very cold, unable to get warm
- Feeling suddenly very weak and sick
- Redness, swelling and/or pain around skin sores, in the mouth, or rectal area
- Loose bowel movements or diarrhea
- A burning sensation when urinating
- A severe cough or sore throat; sputum production

If any symptoms of infection appear, report them to your doctor or nurse right away. Do not ignore these symptoms. Do not use Tylenol®, Advil®, aspirin-containing medication, or any other medicine unless you check with your doctor or nurse. Your doctor or nurse may give more specific instructions for you to follow if you have a fever (such as taking antibiotics) based on your special situation.

### *Why is infection more likely?*

Most anticancer drugs affect the bone marrow, decreasing its ability to produce blood cells. The white blood cells produced in the bone marrow help to protect your body by fighting bacteria that cause infection. During the course of your therapy, the doctor will closely watch your blood cell count. If you have a reduced white cell count, it is very important that you try to prevent infection by taking the steps listed below

- Wash your hands often during the day; be sure to wash them well before eating and after using the bathroom
- Avoid crowds, as well as people who have contagious illnesses such as colds, chickenpox, or the flu
- Maintain good oral hygiene. Use a soft-bristled toothbrush. Floss very gently



## *Nausea and Vomiting*

Report to your doctor or nurse immediately if you have nausea that makes it difficult for you to eat, or if you vomit more than twice in one day. Vomiting may cause dehydration. Take anti-nausea medication as ordered. Notify the doctor or nurse if your medication is not effective.

- Avoid large meals and foods that are fatty and spicy
- Eat foods at room temperature. Try juice, crackers, sandwiches, cottage cheese or cereal
- Eat six small meals a day instead of three larger meals
- Avoid preparing foods when you feel nauseated
- Exercise moderately. Some studies have shown that moderate exercise helps lessen nausea



## Sexual Problems

If you are pregnant, you should not take any treatments without checking with your doctor. You should use appropriate contraception, if applicable, during therapy to avoid getting pregnant.

Menstrual periods may become irregular or stop completely while you are undergoing chemotherapy. Women are also more likely to get vaginal infections and may experience menopause-like symptoms, like hot flashes. Chemotherapy can cause premature ovarian failure and menopause in women.

Vaginal dryness and scar tissue can result with certain treatments, such as radiation and chemotherapy for rectal cancer, anal cancer, or cervical cancer. Ask your doctor for details.



### **Women:**

*The safety of chemotherapy and other drugs used in cancer therapy during pregnancy is generally not well known.*



### **Men:**

*Chemotherapy drugs may affect sperm cells, which can result in temporary or permanent infertility (sterility). Impotence, either temporary or permanent, is frequent with certain treatments. Ask your doctor for details.*

# Complete Blood Count

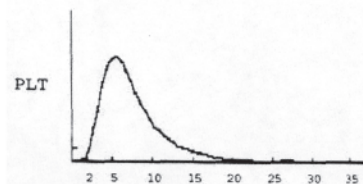
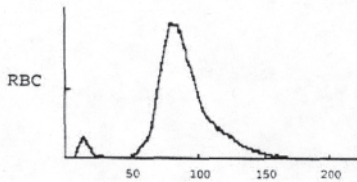
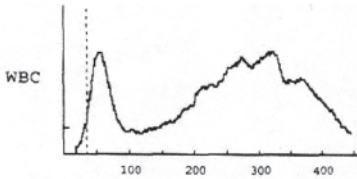
The complete blood count is a test run in your blood sample to determine the numbers of white blood cells, red blood cells, and platelets. Normal results may vary slightly according to the laboratory.

## PACIFIC SHORES MEDICAL GROUP CD1800 SPECIMEN DATA REPORT

Specimen ID:  
Patient:  
Sex: DOB:  
Physician:  
Comments:

Analyzed:  
Operator I.D.:  
Sequence #:  
Mode: Open  
Collected:

TEST	RESULT	K/uL	FLAG	LIMIT	REFERENCE RANGE (LIMIT 1)	
WBC	<u>17.6</u>	K/uL	H	[ ]*	4.6 - 10.9	K/uL
LYM	2.6	R1		[ * ]	0.6 - 4.1	10.0 - 58.5 %L
*MID	1.1			[ * ]	0.0 - 1.8	0.1 - 24.0 %M
GRAN	<u>13.9</u>	79.0	H	[ ]*	2.0 - 7.8	37.0 - 92.0 %G
RBC	4.22	M/uL		[ * ]	4.20 - 6.30	M/uL
HGB	<u>11.6</u>	g/dL	L	[ * ]	12.0 - 18.0	g/dL
HCT	<u>35.0</u>	%	L	[ * ]	37.0 - 51.0	%
MCV	83.0	fL		[ * ]	80.0 - 97.0	fL
MCH	27.5	pg		[ * ]	26.0 - 32.0	pg
MCHC	33.1	g/dL		[ * ]	31.0 - 36.0	g/dL
RDW	14.0	%		[ * ]	11.5 - 14.5	%
PLT	<u>504.</u>	K/uL	H	[ ]*	140. - 440.	K/uL
MPV	7.4	fL		[ * ]	0.0 - 99.8	fL



Please ask your nurse or doctor... about any additional details concerning your complete blood count.

\*MID cells may include less frequently occurring and rare cells correlating to monocytes, eosinophils, basophils, blasts and other precursor white cells.

**White blood cells (WBC)** indicate the number of white blood cells circulating in the blood. The normal range is 4.6 to 10.9 and the laboratory printout will show the number under the "normal" column if the number is within normal limits. If the number is outside the normal range, then it gets printed under the "abnormal" column. White blood cells are part of the immune system and fight infection. There are different types of white cells, including lymphocytes and granulocytes.

Refer to the chart on the previous page to see the percentage of the white cells by type, such as LYMPH (lymphocytes), GRAN (granulocytes), and MID (other cells). The absolute number of granulocytes shown as the last number in the printout is actually an important number. Normally this number should be from 2 to 7.8. If the number is below normal, and especially if it is below 1.0, it can indicate that the person is prone to infection.

**Red blood cells (RBC), hemoglobin (HGB), and hematocrit (HCT)** are the three numbers that measure the proportion of red blood cells in the blood. Red blood cells carry oxygen, and therefore they are important to the overall function of the body. Low numbers can be associated with fatigue and possibly shortness of breath, difficulty functioning, and sometimes headaches, chest pain, irritability, and inability to rest and sleep well. Normal ranges tend to be a bit higher for men than for women and overall are: RBC 4.20- 6.30 to hemoglobin 12.0 to 18.0, and hematocrit 37.0 to 51.

The MCV, MCH, MCHC, and RDW are somewhat less important indicators. These are indices that outline certain characteristics of the red cells. Sometimes these indices can help the doctor determine what kind of problem there is with the red cells, such as lack of iron, lack of vitamin B-12, or an abnormality in the bone marrow.

**Platelets** are an important component of the coagulation system. Low platelets are associated with excessive bleeding. On the other hand, sometimes the platelet count can be very high, and that can be associated with an excessive risk of having blood clots. The normal platelet count range is from 140 to 440.

# Glossary

This glossary reviews the meaning of some common words and expressions that you may hear.

## **Adjuvant therapy**

Anticancer drugs, hormones, radiation therapy, or other medication given after surgery to prevent the cancer from coming back.

## **Anemia**

Having too few red blood cells. Symptoms of anemia include feeling tired, weak, and short of breath.

## **Antiemetic**

A medicine that prevents or controls nausea and vomiting.

## **Blood cell count**

The number of red blood cells, white blood cells, and platelets in a sample of blood. This is also called complete blood count (CBC).

## **Bone marrow**

The inner, spongy tissue of bones where blood cells are made.

## **Cancer**

Uncontrolled growth of malignant cells that invade and spread if left untreated. Malignant cells have lost the natural mechanisms that control their growth.

## **Central venous catheter**

A special thin, flexible tube placed in a large vein. It remains there for as long as it is needed to draw blood and deliver medications or fluids.

## **Chemotherapy**

The use of drugs to treat cancer.





### **Diuretics**

Drugs that help the body get rid of excess water and salt. Also known as water pills.

### **Infusion**

Slow and/or prolonged intravenous delivery of a drug or fluids.

### **Injection**

Using a syringe and needle to push fluids or drugs into the body; often called a “shot.”

### **Intramuscular (IM)**

Into a muscle.

### **Intravenous (IV)**

Into a vein.

### **Malignant**

Used to describe a cancerous tumor.

### **Mucositis (also known as stomatitis)**

Sores and inflammation of the lining of the mouth.

### **Peripheral neuropathy**

A condition of the nervous system that usually begins in the hands and/or feet with symptoms of numbness, tingling, burning, and/or weakness. Can be caused by certain anticancer drugs.

### **Platelets**

Blood cells that help stop bleeding.

**Port (Portacath)**

A small plastic or metal container surgically placed under the skin and attached to a central venous catheter inside the body. Blood can be drawn and medications or fluids can be administered through the port, using a special needle.

**Radiation therapy**

Cancer treatment with radiation (high-energy rays).

**Red blood cells (RBCs)**

Cells that supply oxygen to tissues throughout the body.

**Subcutaneous (SQ or SC)**

Under the skin.

**Tumor**

An abnormal growth of cells or tissues. Tumors may be benign (noncancerous) or malignant (cancerous).

**White blood cells (WBCs)**

The blood cells that fight infection.







# January 200\_

S	M	T	W



# February 200\_

S	M	T	W





# March 200\_

S	M	T	W



# April 200\_

S	M	T	W



# May 200\_

S	M	T	W



# June 200\_

S	M	T	W





# July 200\_

S	M	T	W



# August 200\_

S	M	T	W



# September 200\_

S	M	T	W



# October 200\_

S	M	T	W





# November 200\_

S	M	T	W



# December 200\_

S	M	T	W



# January 200\_

S	M	T	W



# February 200\_

S	M	T	W





# March 200\_

S	M	T	W



# April 200\_

S	M	T	W



# May 200\_

S	M	T	W



# June 200\_

S	M	T	W









*Pacific Shores Medical Group*  
[www.pacshoresoncology.com](http://www.pacshoresoncology.com)

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Los Alamitos, CA 90720  
562-430-5900

222 W. Eulalia Street  
#100-B  
Glendale, CA 91204  
818-637-7611

19582 Beach Blvd, #212  
Huntington Beach, CA 92648  
714-252-9415

207 S. Santa Anita Street, #G-18  
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