



# GOOD SAMARITAN HOSPITAL MEDICAL CENTER



## A Palliative Approach for Patients with Fungating Malignant Breast Wounds

Bonnie Edsall, RN, BSN, CBCN, CBPN-IC, Myra Graham, RN, BSN, Annemarie Loeschner, RN, BSN, Deborah Lugo, RN, OCN, Cindy Saraceno, RN, CHPN, and Deborah Scuderi, RN

### Hospital and Program Description

Good Samaritan Hospital Medical Center is a 537-bed (including 100 nursing home beds) MAGNET- designated community hospital located in West Islip, New York. The Palliative Care Program is a consultation service supported by an interdisciplinary team providing acute palliative care in a dedicated, 11-bed Acute Palliative Care Unit and throughout the hospital, as well as an outpatient clinic. The model of care delivered by the NAPBC accredited BHC is representative of the philosophy of PC to its perfection, offering support to patients from the time of diagnosis through the disease trajectory.

### Objectives

Discuss the Collaborative interdisciplinary approach of the Breast Health Center (BHC) Team and the Palliative Care (PC) Team to improve quality of life and symptom management for patients presenting with fungating breast wounds (FBW).

#### 2009-2011

12 female Breast Cancer patients with FBW's  
Mean age: 66 Age range: 35-94  
Single: 3, Widowed: 3, Married: 6  
Neglected BC: 5, Recurrent BC: 7  
Caucasian: 7 African American: 5

### Method

- ❖ Facilitate swift referrals for patients with FBW to both the BHC & PC for combined services
- ❖ BHC and PC updated patient intake and assessment forms to remind and to capture all BHC/PC referrals as well as denote FBW's and usage of Palliative gel for symptom management.
- ❖ PC team evaluated patients with FBW for symptom management. The use of Palliative gel, a combination of Lidocaine jelly and Metronidazole was ordered for symptom management with in 24hrs from consult.
- ❖ Palliative Care Gel policy written for consistency of wound care. Local pharmacy provides for outpatient prescriptions



### Results

- ❖ 12 –BHC/PC referrals completed for patients with FBW's between 2009 and 2011. Emotional & Spiritual support for pt. & family
- ❖ 100% Wound assessment completed and palliative gel ordered with improved pain relief and odor control
- ❖ 100% family meetings completed for pt/family goals of care
- ❖ 3 Outpatient PC Clinic referrals, 1 referral to the Genetic Counselor
- ❖ 4 BHC Lend a Helping Hand program referrals-paid for Palliative Gel
- ❖ Case study patient agreed to treatment options, attended cancer support group, completed advance directives, stated improved quality of life, continues to share her story.

### Conclusion

Fungating breast wounds are a distressing problem for a significant number of women with advanced breast cancer. Malodor is one of the most distressing symptom of patients with FBW's. The goal of care is to maintain or improve QOL through symptom control. The use of palliative gel in the home and hospital setting has proven to have a positive impact on QOL for these 12 patients. Further research to explore and describe the experience of patients living with FBW's using palliative gel for symptom management should be considered.