Immunotherapy Toxicities

A new electronic documentation template to improve patient care

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BACKGROUND: Emerging immunotherapies are associated with numerous toxicities. Although traditional health records allow nurses to document system-based assessments, few offer immunotherapy-based documentation templates to assess and grade toxicities.

OBJECTIVES: The aim of this article is to present the development of a standardized template for documenting genetically modified cellular product–related toxicities in an electronic health record (EHR).

METHODS: Through interprofessional collaboration, a documentation template for genetically modified cellular product–related toxicities was developed in an EHR, allowing for standardized documentation, data reporting, and tracking of immune-related toxicities.

FINDINGS: The documentation template has enhanced the quality and safety of practice at the authors' institution and provides a framework for other nursing units when initiating immunotherapy care.

KEYWORDS
immunotherapy; electronic health records; documentation; toxicity

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INTEGRATING NEW IMMUNOTHERAPY TREATMENTS INTO CLINICAL CARE requires broad infrastructural adaptations to support safe and effective care, including the training and education of staff on the documentation of treatment-related toxicities and side effects. Traditional health record documentation provides nurses with a place to document assessment findings by system; however, a need was identified for grouping together immunotherapy-related findings, specifically information on genetically modified cellular products, to provide a more cohesive narrative of potential treatment-related toxicities. As electronic health records (EHRs) are implemented across practice settings, unique opportunities exist to develop standardized documentation templates to capture and report integral aspects of patient care. Well-designed and uniformly used patient-care information systems can decrease complexity and support clinicians in their efforts to manage information and its overall flow among nurses, physicians, the rapid-response team, the respiratory team, physical and occupational therapists, social workers, chaplains, and case management workers (Keenan, Yakel, Dunn Lopez, Tschannen, & Ford, 2013). This article presents the collaborative work of one National Cancer Institute (NCI)–designated comprehensive cancer center to design and implement a standardized documentation template for immunotherapy-related toxicities in the EHR. Current successes and future directions will be shared to provide a template for oncology nurses in the clinical settings that are considering or in the early phases of introducing immunotherapy research and treatment.

Background

The 48-bed inpatient lymphoma/myeloma unit on a 672-bed NCI-designated comprehensive cancer center was one of the first to implement emerging immunotherapy clinical trials. This cancer center serves about 1,700 patients with lymphoma and 500 patients with myeloma each year, including patients with Hodgkin and non-Hodgkin lymphomas. The inpatient unit implemented genetically modified cellular product protocols, which have been delivered to 70 patients to date. These protocols consist of administering a patient's own cells, primarily in the form of chimeric antigen receptor–modified T cells, which have been genetically altered within a laboratory setting, to activate the body's own immune system to better detect and kill malignant cells. The introduction