# EBMT-NG East Forum Standard Operating Procedure (SOP) No.:001/version01

# Oral Cavity care in Patients after High-dose Chemotherapy and Stem Cells Transplantation

1. Goal: To minimize complications associated with the oral mucositis.

# 2. Scope of Application:

Head nurse, ward nurse, general nurse, auxiliary nurse, nurse assistant

# 3. Competences and Responsibilities:

Head nurse – the definition and monitoring of the procedures Ward nurse - training of personnel, the assurance of devices and materials Nurse – monitoring of the patient, drug administration, the fulfilment of prescriptions Auxiliary nurse and assistants - the decontamination and cleaning of materials used

#### 4. Abbreviations and Definitions:

OM – oral mucositis (specific affection of oral mucosa after chemotherapy)

#### 5. Devices and Material:

Torch, gloves, tongue depressor, mask

Ice cold water, ice cubes or crushed ice (in melphalan, fluorouracil, adetrexate chemother)

#### 6. Procedure:

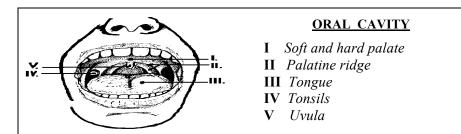
- 1. After the admission of a patient, instruct him/her about the risk of OM development.
- 2. Recommend the following basic oral care:
  - For oral rinses (mouth-washes) use solutions that are non-irritating, non-toxic and pleasant for the patient. Rinse the oral cavity always after eating or more often, but at least 3 times a day. It is not necessary to stick to the use of anti-microbial solutions, unless a clearly infectious affection is concerned and unless there is no other reason for their application (see 5 below).
  - Regular cleaning of teeth with a soft toothbrush. If there is gum bleeding, rinse the mouth with selected solutions and wipe the teeth with small brushes or gauze dipped in the solution.
  - Regular cleaning of denture prosthesis and its removal during the night and during the whole day in case of painful OM.
- 3. In case of the OM development, recommend continuing with the care specified above and with respect to individual tolerance of the patient.
- 4. Oral Cryotherapy should be applied in patients with bolus or short infusion (15minutes) of melphalan, fluorouracil or adetrexate. Instruct the patient to start sucking, rinsing or gargling ice cold water, or ice cubes or crushed ice 5 minutes before the chemotherapy administration. Keep on this procedure during the chemotherapy administration (maximum 15 minutes infusion) and 15 minutes thereafter. The patient may spit out the cold water, but gargling and swallowing it occasionally can help prevent the pharyngeal and oesophageal mucositis. Cryotherapy can be stopped whenever the patient wishes.
- 5. In case of severe ulcerative OM, local infection or in case of bleeding, prefer antimicrobial solutions for rinsing (e.g. solutions of chlorhexidine, povidon-iodine), but always with respect to the preference and tolerance of the patient (regular and careful rinsing is the most important even if no antimicrobial solutions are given).
- 6. In case of oral pains, offer local protective viscous gels or solutions with local anaesthetic (be aware of the possibility of the local anaesthetic absorption, its overall

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toxicity and limitations of the swallowing ability). Agree with the physician on a treatment with i.v. analgesics (e.g. tramadol) and opiates.

- 7. Daily ask the patient on the feelings in the oral cavity, the ability to eat and drink.
- 8. Daily evaluate the development of OM. Look into the oral cavity, use a torch light and a tongue depressor for help. Proceed carefully with regard to the patient oral cavity condition. Look at individual areas of the oral cavity. Evaluate the OM grade according to the WHO criteria and the pain according to VAS (see the table below)
- 9. In case of suspicion of the infection development in oral cavity, inform the physician and carefully take smears for microbiological and mycological examination.



# OM grading (severity) - WHO criteria

Grade 0	Grade 1	Grade 2	Grade 3	Grade 4
Not present	Discomfort or pain and erythema of oral mucosa	Defects, ulcers or pseudomembranes, food can be accepted without limitations	Defects, ulcers or pseudomembranes, only liquids or creams can be accepted	Defects, ulcers or pseudomembranes, not possible to eat food, liquids, creams

# Evaluation of OM Pain - Visual Analogue Scale (VAS)

#### **Pain intensity: 0** = *no pain*, 10 = *unbearable pain*

A patient shall mark the intensity of pain on the segment and express by a number.

#### 0-----10

- 7. Quality Control: Quality of documentation, audit on OM care once a year
- 8. Expected Results: OM without the development of infectious complications.
- 9. Documentation: The nursing part of the clinical record of a patient
- 10. Forms: The nursing part of the clinical record of a patient

# 11. Related SOP:

# 12. References:

- 1. Vokurka Samuel et al.: Ošetřovatelské problémy a základy hemoterapie, Galén, 2005
- 2. Mucositis Guidelines: MASCC/ISOO 2006, NCCN 2008, ESMO 2009.

#### CHANGES/REVISIONS:

Date:	Reviewed/Approve d by:	Signature:	Revision/change:

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