**Chapter B6 – Chemotherapy Service**

1. **Basic Information**

|  |  |
| --- | --- |
| Name of Service |       |
| Location of Service |       |
| Scope of Service |       |
| ***For In-patient Service*** |
| Number of in-patient beds |       |
| Age limit of patients |       |
| ***For Day Centre*** |
| Operating hours of the service |       |
| Number of day beds |       |
| Number of day chairs |       |
| Age limit of patients |       |

 Please indicate whether the following anaesthetic procedures will be provided:

|  |  |
| --- | --- |
| **Anaesthetic procedures** | **If yes, please indicate location** |
| General anaesthesia Yes [ ]  No [ ]  |       |
| Major regional anaesthesia Yes [ ]  No [ ]  |       |
| Deep sedation Yes [ ]  No [ ]  |       |

1. **Medical Practitioner-in-charge**

|  |  |
| --- | --- |
| Name in English |       |
| Name in Chinese |       |
| Post Title |       |
| Qualifications |                 |

1. **Nurse-in-charge**

|  |  |
| --- | --- |
| Name in English |       |
| Name in Chinese |       |
| Post Title |       |
| Qualifications |                 |

1. **Staffing**
	1. Manpower\* (including the Nurse-in-charge)

|  | **Rank** | **No.** |
| --- | --- | --- |
| Resident medical practitioner |       |       |
|  |       |       |
| Nurse |       |       |
|  |       |       |
| Others | HCA |       |
|  |       |       |
|  |       |       |

*\* “Proposed manpower” for new hospital*

* 1. Other requirement

|  |  |
| --- | --- |
| 1. Chemotherapy services are provided under the direction of a specialist
 | Choose an item. |
| 1. A registered nurse who has been trained in the practice of oncology nursing is available at all times as the duty nurse-in-charge to supervise nursing care of the service
 | Choose an item. |
| 1. Nurses who have received relevant training are assigned to provide care and support to the patient
 | Choose an item. |

1. **Critical or Major Equipment**
	1. Equipment list

| **Type of equipment** | **Quantity** | **Schedule of maintenance as per the manufacturer’s recommendation** | **Date of last service / maintenance#** |
| --- | --- | --- | --- |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |

*# Not applicable for new hospital*

* 1. Other requirements

|  |  |
| --- | --- |
| 1. Equipment is readily available to manage emergencies including anaphylaxis, extravasation, cardiac arrest and spillage of cytotoxic drugs
 | Choose an item. |
| 1. All equipment is installed, operated, maintained and calibrated according to manufacturer’s recommendation
 | Choose an item. |
| 1. There are operating manuals and procedures for use of equipment
 | Choose an item. |
| 1. There are procedures and schedules for cleaning, disinfection and decontamination of equipment
 | Choose an item. |
| 1. Staff using equipment have completed training in the safe and proper use of the equipment
 | Choose an item. |
| 1. There is preventive maintenance schedule established for all critical or major equipment
 | Choose an item. |

1. **Service Delivery and Care Process**

|  |  |
| --- | --- |
| 1. There are written policies and procedures for the following:
 |  |
| 1. obtaining written consent from patient before commencement of chemotherapy
 | Choose an item. |
| 1. precautions for the preparation of cytotoxic drugs
 | Choose an item. |
| 1. administration of cytotoxic drugs
 | Choose an item. |
| 1. prevention and treatment of complications arising from chemotherapy
 | Choose an item. |
| 1. giving advice to patients on side effects or complications
 | Choose an item. |
| 1. use, handling, storage and disposal of chemotherapeutic agents
 | Choose an item. |
| 1. handling of body wastes
 | Choose an item. |
| 1. dealing with spillage or accidental contamination
 | Choose an item. |
| 1. managing emergencies including anaphylaxis, extravasation and cardiac arrest
 | Choose an item. |
| 1. If the service is operated by a separate entity in the hospital, mechanism exists to monitor the quality of services provided by the entity
 | Choose an item. |