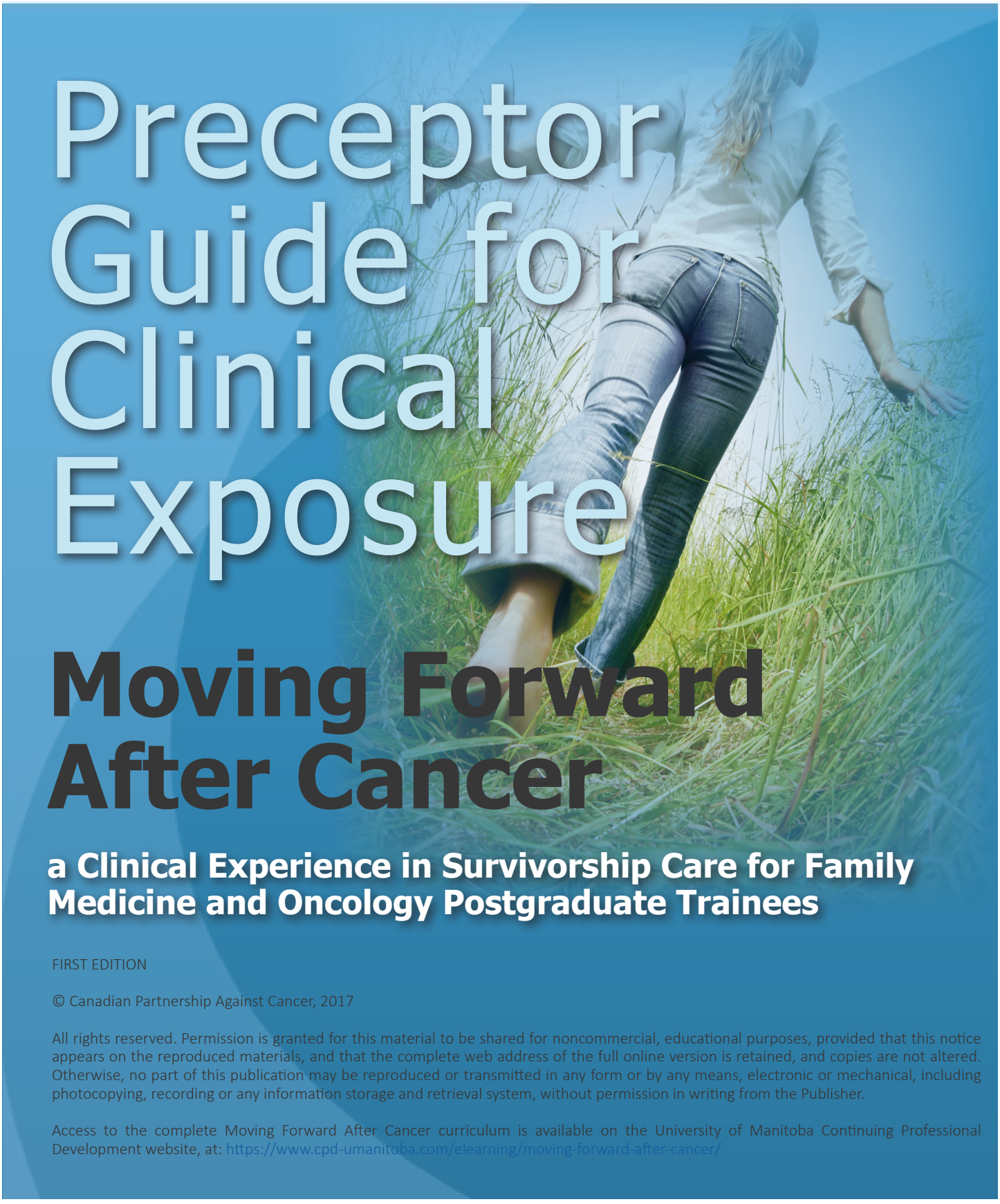

Preceptor Guide for Clinical Exposure

Moving Forward After Cancer

a Clinical Experience in Survivorship Care for Family Medicine and Oncology Postgraduate Trainees

FIRST EDITION

Access to the complete Moving Forward After Cancer curriculum is available on the University of Manitoba Continuing Professional Development website, at: https://www.cpd-umanitoba.com/elearning/moving-forward-after-cancer/

integrating primary care + cancer care in survivorship

An initiative of / Une initiative du

CANADIAN PARTNERSHIP AGAINST CANCER

PARTENARIAT CANADIEN CONTRE LE CANCER

Moving Forward After Cancer

A Clinical Experience in Survivorship Care for Family Medicine and Oncology Postgraduate Trainees

Overview

Moving Forward After Cancer is delivered across three, integrated learning environments. An online self-study course primes trainees to participate in meaningful discussions at an instructor-led, interspecialty workshop. These are rounded-off with an opportunity to practice skills in a clinical experience that is organized locally.

Guide for Preceptors

A resident in family medicine (possibly an oncology trainee, as well) will be joining you in clinic for a clinical experience in cancer follow-up care (i.e., survivorship care). This may be a clinic designated for follow-up care, or a clinic that combines on-treatment and follow-up care.

At this point, the resident has just completed or is about to complete two learning activities in the domain of cancer survivorship care following the *Moving Forward After Cancer* curriculum: a 60-minute, interactive online course with cancer site-specific follow-up care strategies for breast, prostate and colorectal cancers; a half-day, interspecialty workshop with a focus on care coordination among family physicians and oncologists.

To help you prepare for clinic, four learning objectives for the clinical experience are listed below. Please consider taking a moment either during or after clinic to ask residents about their experience overall. These learning objectives and questions may be used to help guide the conversation. If possible, please include both the oncology and family medicine trainee in this conversation as a means of enhancing their reflection on coordinated care.

Learning Objectives

1. Conduct a survivorship/follow-up care visit where the four domains of survivorship care are addressed.
    - Prevention of new and recurrent cancer through health promotion, including smoking cessation and physical activity.
    - Surveillance screening for new and recurrent cancer.
    - Management of physical and psychosocial consequences of cancer and cancer treatment (see below).
    - Coordination of care with other providers (see below).

2. Apply a specific management approach for at least two of these common survivorship issues.
    - Fatigue; peripheral neuropathy; depression; anxiety; sexual dysfunction; return-to-work issues

3. Identify and involve other health professionals in response to a health concern raised by a patient.
    - Who else can you involve in helping the patient move forward after cancer? For example: physiotherapists; dieticians; patient's family physician; fitness consultants; psychologists or counsellors.
    - How can communication among family physicians, oncologists and their patients be optimized?

4. Appreciate the patient experience of recovery and rehabilitation after cancer treatment.
    - Include this particular question in your patient visits today: "What have you found to be among the greatest challenges in your recovery since your cancer treatment ended?"