Use of an Oral Mucositis Assessment Tool in Pediatric Patients Sara Robinson Newton, MSN, RN, CPHON Judy Ascenzi, DNP, RN, CCRN-K

Background

- Mucositis is a common side effect of cytotoxic cancer treatment and conditioning for hematopoietic stem cell transplants (HSCTs) involving the breakdown of mucous membranes of the alimentary tract^{1-3, 6}
- Complications of mucositis include malnutrition, weight loss, and systemic infection⁴
- Adverse effects lead to longer hospitalizations, may limit future doses of chemotherapy/radiotherapy, and can cost $$25,000 \text{ per individual}^{5,6}$
- Identifying mucositis is challenging and inconsistent
- Children's International Mucositis Evaluation Scale (ChIMES) screens pediatric patients 0-18 years old for mucositis via functional impact and allows completion by proxy⁷
- The purpose of this project was to improve pediatric oral mucositis assessment by using a validated screening tool

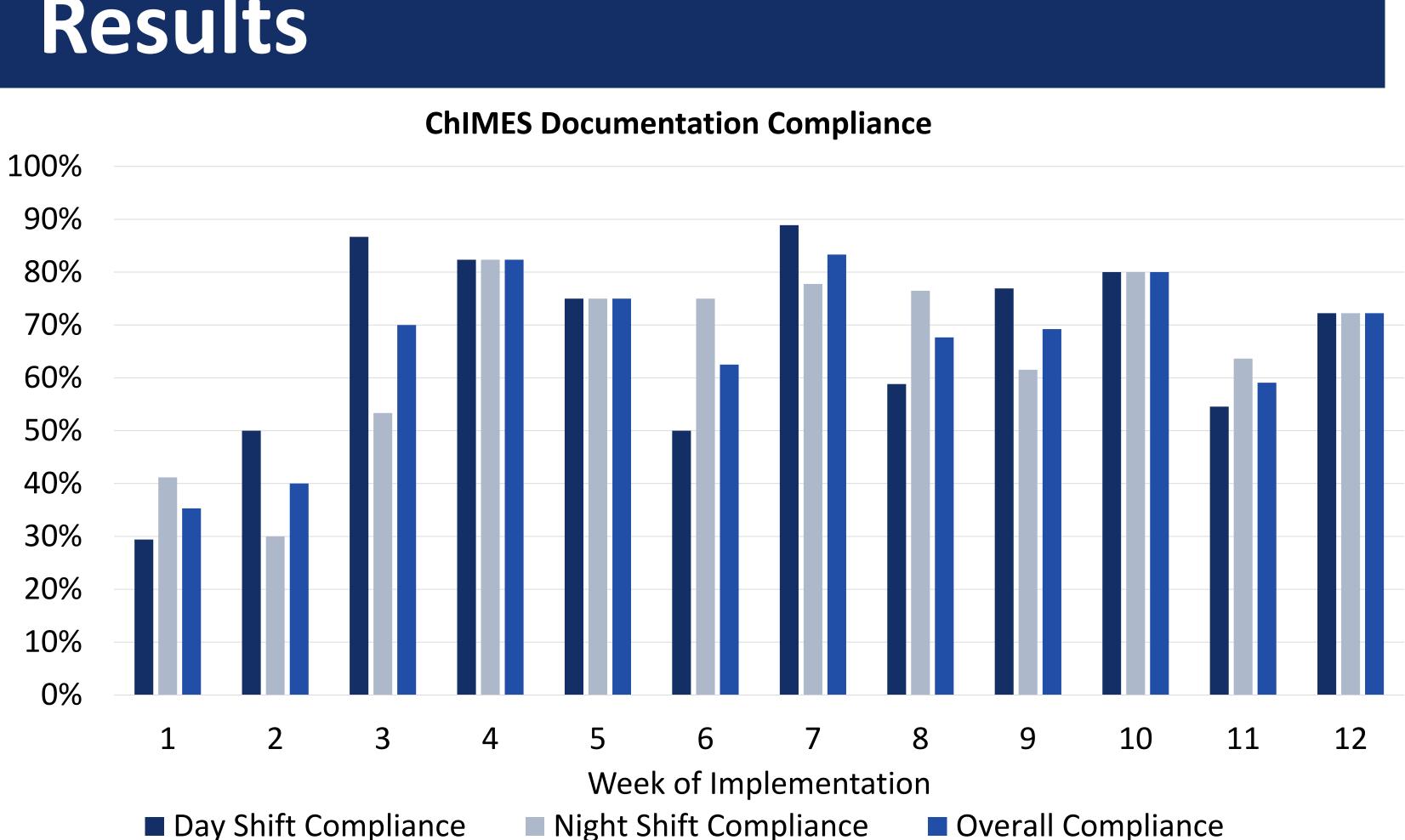
Project Aims

- 1. Ensure twice daily mucositis screening for pediatric oncology patients
- 2. Increase nursing staff confidence in assessing oral mucositis

Methods

- Design and Setting: QI project with a pre-post design on a 20 bed inpatient pediatric oncology unit in an urban academic medical center in the northeastern United States
- Intervention:
- Education on mucositis and ChIMES provided to nurses
- ChIMES was added to the electronic health record (EHR)
- Measurement:
- Weekly analysis of assessment completion
- Pre and post surveys focused on confidence in mucositis assessment completed by nurses

Results



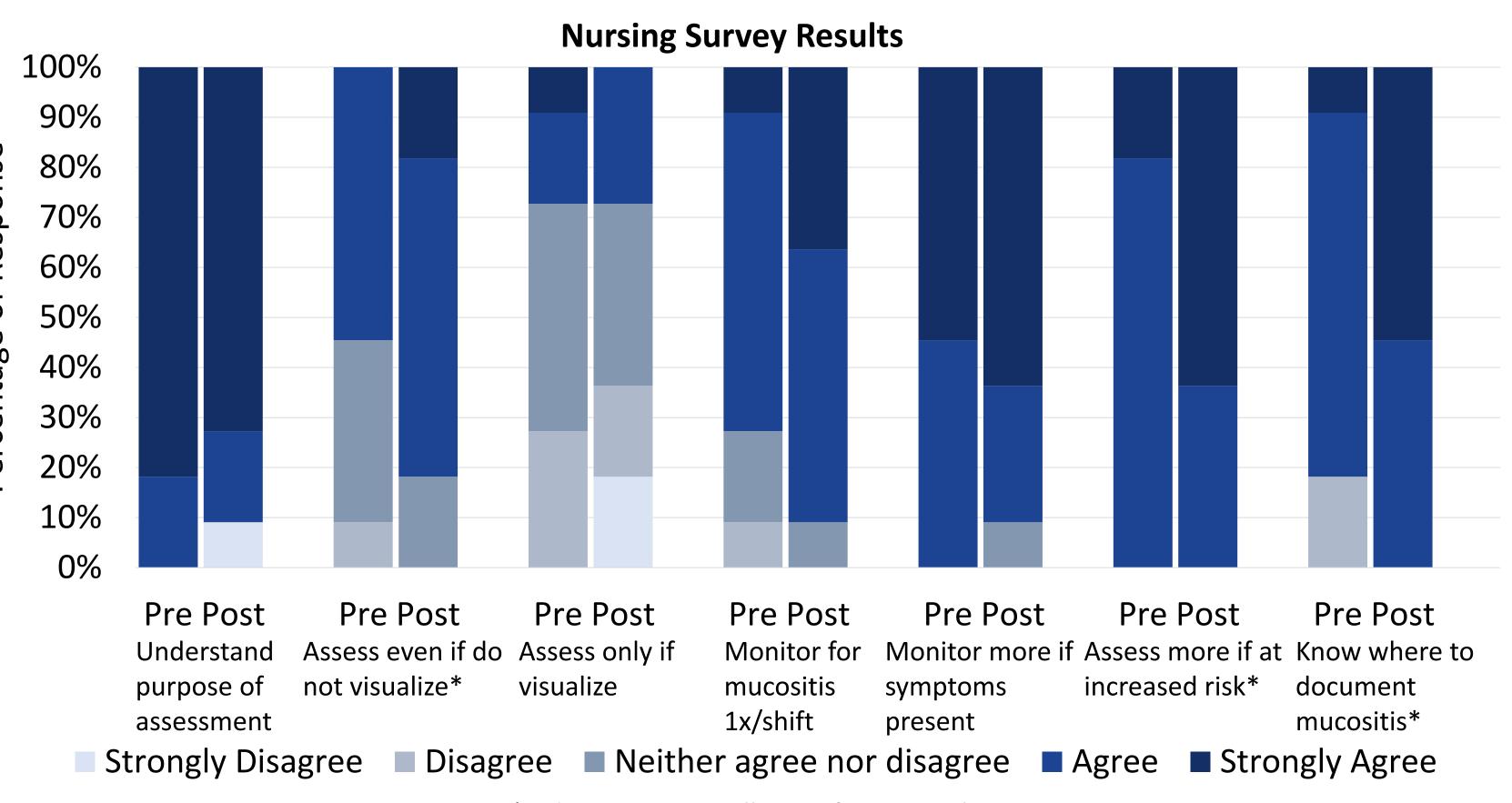
Day Shift Compliance



100 90 80 60 50 40 30 . 10 20 Σ ₁₀

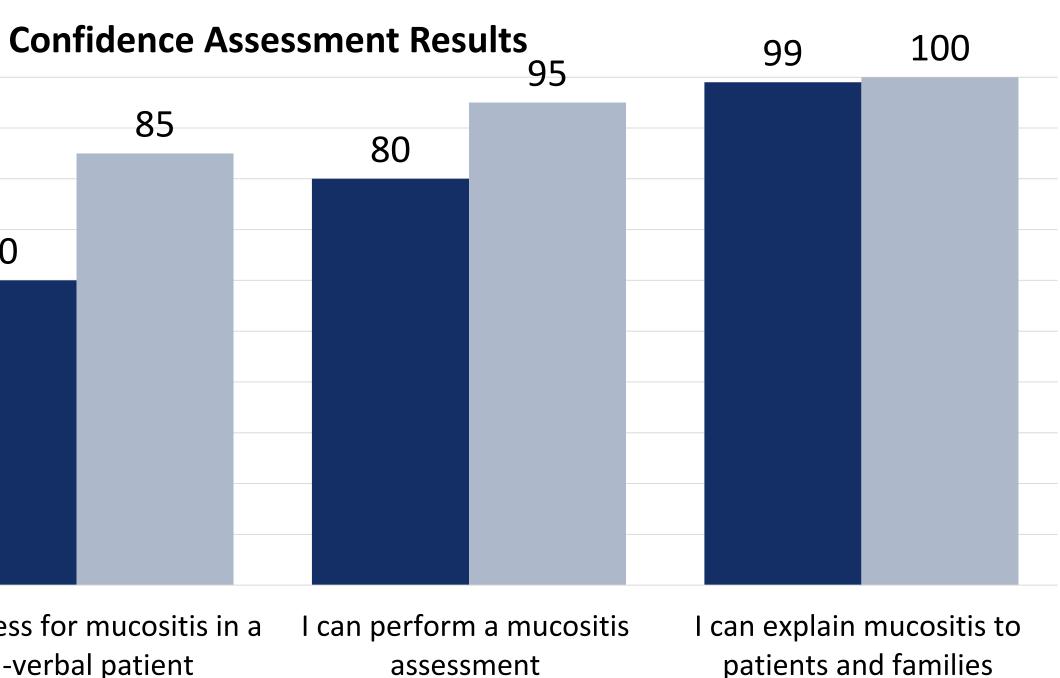
verbal patient* non-verbal patient

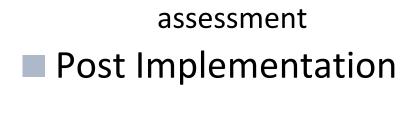
Pre Implementation



^{*}Indicates Statistically Significant Results







ChIMES used with permission granted by Deborah Tomlinson and Lillian Sung on April 27,2021

- (p=0.034)
- (p=0.034)
- beneficial for patients

Conclusions and Implications

References

- 8(1), 33-39. <u>https://doi.org/10.1007/s00520990009</u>
- https://doi.org/10.3390/ijerph17041235
- Oncology, 13(30), 2823-2852. https://doi.org/10.2217/fon-2017-0418 16. https://doi.org/10.1136/bmjspcare-2014-000804



SCHOOL of NURSING

Results Continued

• Percent change evaluating documentation compliance calculated over the 12-week period was found to be 105%. • Results (n=11) demonstrated that there was a statistically significant improvement in nurses:

• Ability to assess for mucositis in verbal patients (p=0.042) • Likelihood to assess for mucositis regardless of visible lesions

• Likelihood to assess for mucositis if the patient is at risk for mucositis at that time (p=0.025) • Knowledge of where to document mucositis in the EHR

• 96% (n=26) of participants felt that ChIMES increased their awareness of assessing patients for mucositis

• 84% (n=26) of participants felt that ChIMES in the EHR was

• Improved frequency of assessment as familiarity increased • Nursing confidence increase was not statistically significant • Survey results demonstrated utility of ChIMES in the EHR • With ChIMES, nurses are more likely to assess for mucositis regardless of visible ulcerations and in patients who are verbal Increased knowledge of where to document mucositis in EHR • ChIMES could be implemented on other pediatric units

. Bellm, L.A., Epstein, J.B., Rose-Ped, A., Martin, P., & Fuchs, H.J. (2000). Patient reports of complications of bone marrow transplantation. Supportive Care in Cancer,

2. Curra, M., Gabriel, A.F., Ferreira, M.B.C., Martins, M.A.T., Brunetto, A.T., Gregianin, L.J., Martins, M.D. (2021). Incidence and risk factors for oral mucositis in pediatric patients receiving chemotherapy. Supportive Care in Cancer, 29, 6243-6251. https://doi.org/10.1007/s00520-021-06199-5

Damascena, L. C. L., de Lucena, N. N. N., Ribeiro, I. L. A., Pereira, T. L., Lima-Filho, L. M. A., & Valença, A. M. G. (2020). Severe Oral Mucositis in Pediatric Cancer Patients: Survival Analysis and Predictive Factors. International Journal of Environmental Research and Public Health, 17(4), 1235.

4. Kuiken, N.S., Rings, E.H., & Tissing, W. (2015). Risk analysis, diagnosis and management of gastrointestinal mucositis in pediatric cancer patients. Critical Reviews in Oncology Hematology, 94, 87-97. https://doi.org/10.1016/j.critrevonc.2014.12.009

McCullough, R.W. (2017). US oncology-wide incidence, duration, costs and deaths from chemoradiation mucositis and antimucositis therapy benefits. Future

6. Sung, L., Robinson, P., Treister, N., Baggott, T., Gibson, P., Tissing, W., Wiernikowski, J., Brinklow, J., & Dupuis, L.L. (2015). Guideline for the prevention of oral and oropharyngeal mucositis in children receiving treatment for cancer or undergoing hematopoietic stem cell transplantation. BMJ Supportive and Palliative Care, 7, 7

. Tomlinson, D., Gibson, F., Treister, N., Baggott, C., Judd, P., Hendershot, E., Maloney, A.M., Doyle, J., Feldman, B., Kwong, K., & Sung, L. (2010). Refinement of the Children's International Mucositis Evaluation Scale (ChIMES): child and parent perspectives on understandability, content validity and acceptability. European Journal of Oncology Nursing, 14(1), 29-41. https://doi.org/10.1016/j.ejon.2009.10.004