Distress Screening and Psychosocial Management of Adult Cancer Patients

Disclaimer: This algorithm has been developed for MD Anderson using a multidisciplinary approach considering circumstances particular to MD Anderson’s specific patient population, services and structure, and clinical information. This is not intended to replace the independent medical or professional judgment of physicians or other health care providers in the context of individual clinical circumstances to determine a patient’s care.

Note: Refer to the Suicide Risk/Precautions and Emergency Detention Policy (MD Anderson Institutional Policy # CLN1183) for guidelines on identification and care of patient at low, medium, and high risk of suicide.

Patient screened for distress at specified time points (new patient visit, every 30 days during outpatient visit, EC visit, and within 24 hours of admission) (see note above)

PNS1 distress score of 6 or more?

Yes

- A referral is generated to social work through EHR2
- For immediate concerns contact Social Work on call via:
  - Phone call during regular business hours
  - Page during after hours or on weekends

Social Work completes assessment, provides appropriate intervention, and documents in EHR2

Social Work identifies patient needs

Consultation or referral to appropriate provider or ancillary consultative services by primary team

No

Primary team may identify and document any psychosocial needs

Does patient require additional psychosocial support? (see Appendix A and B)

Yes

Provider consult and/or referral service follows-up with primary team as appropriate

Reassess at specified time point (upon arrival to outpatient visit if more than thirty (30) days elapsed since last assessment)

Consider reassessment at other points3 of care

No

EC = emergency center
EHR = electronic health record
PNS = Patient Needs Screening

1 Based on distress question: Please choose the number (0-10) that best describes how much distress you have been experiencing in the past week, including today
2 Clinics with existing mental health professionals (psychiatrists, psychologists, licensed professional counselors) can have their providers complete an assessment, provide appropriate intervention, and document in EHR
3 Additional time points may include:
   - Initiation of any new treatment
   - Pre-surgical and post-surgical visits
   - Transfer to ICU
   - Transitions during treatment such as transitions from chemotherapy to radiation therapy, off treatment, to survivorship or to hospice
   - At any other time when, in the opinion of the clinical practitioner, reassessment is indicated

Copyright 2020 The University of Texas MD Anderson Cancer Center

Department of Clinical Effectiveness V5
Approved by the Executive Committee of the Medical Staff on 09/15/2020
## APPENDIX A: Available Institutional Services

<table>
<thead>
<tr>
<th>Services Requiring Provider Consultation/Referral through EHR</th>
<th>Available Ancillary Services (No Order Required)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adolescent &amp; Young Adult Program</td>
<td>Case Management</td>
</tr>
<tr>
<td>Cancer-related Fatigue Clinic</td>
<td>Children's Cancer Hospital Support Programs</td>
</tr>
<tr>
<td>Children's Cancer Hospital Consultation Services</td>
<td>Integrated Ethics</td>
</tr>
<tr>
<td>Integrative Medicine Individual Clinical Services</td>
<td>Integrative Medicine Group Clinical Services</td>
</tr>
<tr>
<td>Neuropsychology</td>
<td>MyCancerConnection/Volunteer Services</td>
</tr>
<tr>
<td>Oncofertility Clinic</td>
<td>Patient Advocacy</td>
</tr>
<tr>
<td>Pain Management Center</td>
<td>Patient Guest Relations</td>
</tr>
<tr>
<td>Psychiatry</td>
<td>Social Work</td>
</tr>
<tr>
<td>Rehabilitation Services</td>
<td>Spiritual Care and Education</td>
</tr>
<tr>
<td>Sexual Medicine Clinic</td>
<td>The Learning Center (TLC)</td>
</tr>
<tr>
<td>Sleep Lab</td>
<td>Tobacco Treatment Program</td>
</tr>
<tr>
<td>Supportive Care Program</td>
<td></td>
</tr>
</tbody>
</table>
### Distress Screening and Psychosocial Management of Adult Cancer Patients

Disclaimer: This algorithm has been developed for MD Anderson using a multidisciplinary approach considering circumstances particular to MD Anderson’s specific patient population, services and structure, and clinical information. This is not intended to replace the independent medical or professional judgment of physicians or other health care providers in the context of individual clinical circumstances to determine a patient’s care.

### APPENDIX B: Service Descriptions and Needs Addressed

<table>
<thead>
<tr>
<th>Service</th>
<th>Service Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adolescent &amp; Young Adult (AYA) Program</td>
<td>The AYA Adult Program serves patients ages 15-39 years, whether in active treatment or post-therapy survivorship. The program is focused on addressing how a cancer diagnosis and treatment affects all aspects of young patients’ lives (coping, relationships, fertility, school/work life, career goals, long-term health, quality of life, etc). At the first clinic visit patients will see a medical provider, social worker, and vocational counselor for thorough discussion and resource linkage. Patients also have the opportunity to see a nutritionist and be screened by a genetic counselor. The AYA Program further offers a support group, young adult advisory council, scholarship program, annual young adult retreat, etc. and partners with Cancer180 on planning social and educational events for AYAs regardless of where treatment was received.</td>
</tr>
<tr>
<td>Cancer-Related Fatigue Clinic (Internal Medicine Center)</td>
<td>The Cancer-Related Fatigue Clinic provides a global medical evaluation for patients receiving cancer therapy or patients who have completed cancer therapy and have fatigue related to their cancer experience. The clinical assessment includes the utilization of symptom tools to assess multiple symptoms (depression, anxiety, sleep dysfunction, pain, etc.), an evaluation of the total symptom burden, a history and physical examination, and review of necessary laboratory and other diagnostic testing. The etiology of fatigue is often multifactorial and may require several recommendations to appropriately reduce fatigue levels. Exercise is usually a mainstay of treatment in cancer-related fatigue. Other interventions may include medications such as stimulants, behavioral modification therapy, and appropriate treatment of other medical and mood disorders. Some patients may require referrals to other specialties. Each patient is educated regarding aspects of cancer-related fatigue and receives a cancer-related fatigue educational book, providing further information and links to other learning resources. Patients are usually referred by their physicians.</td>
</tr>
</tbody>
</table>
| Case Management                              | The Department of Case Management coordinates continuum of care needs, through referrals, for patients and families in need of discharge services. We also collaborate with insurance companies to provide clinical information to obtain authorization for inpatient admission stays. Discharge services include:  
- Home health, hospice  
- Inpatient and/or outpatient rehabilitation  
- Nursing home or long-term care placement  
- Discharge equipment and infusion services |

Continued on next page
## APPENDIX B: Service Descriptions and Needs Addressed - continued

<table>
<thead>
<tr>
<th>Service</th>
<th>Service Description</th>
</tr>
</thead>
</table>
| Children’s Cancer Hospital Consultation Services and Support Programs | The Children’s Cancer Hospital offers adult services to young adult cancer patients, long term pediatric cancer survivors, and adult patients seeking parenting guidance.  
**The Children’s Cancer Hospital Consultation Services include:**  
- Young adult fertility consultation  
- Clinical psychology services, including psychotherapy  
- Young adult psychiatric services  
- Neuropsychological assessment of cognitive abilities and educational achievement (for adults with developmentally-based intellectual disability and long-term pediatric cancer survivors)  
**The Children’s Cancer Hospital Support Programs include:**  
- Vocational assessment of values, interests, and abilities related to post-secondary educational pursuits and career counseling  
- Young adult life specialist services, including procedural support, and activities/resources throughout hospitalization  
- Young adult secondary education and creative arts programs  
**Additional resources include:**  
- Kim’s Place, a young adult lounge and recreational area |

| Integrated Ethics | The Ethics Consultation Service is available to assist those who are facing ethically significant decisions regarding medical treatment, patient care, or protocol participation. Many of these decisions involve moral values, deeply held beliefs, and/or professional duties or guidelines that can come into conflict. We can help facilitate good communication and shared decision-making when assistance with these concerns is requested. Clinical Ethicists are available to help address ethical questions that arise when the right thing to do is not clear or when disagreement exists about what is best for a patient. We assist patients, families, and healthcare teams to identify and resolve specific ethical issues so that the individuals responsible for decisions can make informed choices. An Ethicist can be reached 24 hours a day, 7 days a week, for clinical ethics consultation. Main Office: (713) 792-8775 or Pager: (713) 404-2863. There is no charge for an ethics consultation. |

*Continued on next page*
APPENDIX B: Service Descriptions and Needs Addressed - continued

<table>
<thead>
<tr>
<th>Service</th>
<th>Service Description</th>
</tr>
</thead>
</table>
| Integrative Medicine Center | The Integrative Medicine Center provides a variety of group and individual clinical services that engage patients and their families to become active participants in improving their physical, psycho-spiritual and social health. The ultimate goals are to optimize health, quality of life and clinical outcomes through personalized evidence-based clinical care, exceptional research and education.  
**Individual clinical services include:**  
- Integrative oncology physician consultation  
- Exercise/physical activity consultation  
- Nutrition consultation  
- Oncology massage  
- Group clinical programs include:  
- Acupuncture consultation  
- Music therapy  
- Yoga, qigong, pilates, tai chi  
- Medication consultation  
- Support groups and educational forums  
- Meditation  
- Cooking for optimal health  
- For more information call (713) 794-4700.  
- Psychology consultation  
- Support groups and educational forums about issues relevant to cancer |
| Learning Center (TLC) | The Learning Center is a free consumer health library that offers information about cancer prevention, cancer treatment, coping and general health. The Learning Center staff can answer your questions and respond via email at asktclstaff@mdanderson.org or visit the website at www.mdanderson.org/tlc;  
Theodore N. Law Learning Center, Main Building, Floor 4, near Elevator A, Room R4.1100 or Levit Family Learning Center, Mays Clinic, Floor 2, near The Tree sculpture Room ACB2.1120. |
| MyCancerConnection/ Volunteer Services | MyCancerConnection offers hope, support and understanding to patients, caregivers and family members from those who have been there. At diagnosis, treatment, recurrence or anytime during the cancer journey, they can match with another survivor, thereby providing a personalized support connection from someone who has had the same experience.  
**Other programs include:**  
- The Cancer Survivorship Conference offering education and fellowship  
- PIKNIC, a lunch and learn  
- Hospitality centers in Main and Mays staffed by survivor and caregiver volunteers who offer support in a relaxing atmosphere  
- Cancer180, a program that addresses the unique needs of young survivors by offering educational and networking opportunities for survivors ages 18-39 years  
For additional information see www.mdanderson.org/mycancerconnection. |

*Disclaimer: This algorithm has been developed for MD Anderson using a multidisciplinary approach considering circumstances particular to MD Anderson’s specific patient population, services and structure, and clinical information. This is not intended to replace the independent medical or professional judgment of physicians or other health care providers in the context of individual clinical circumstances to determine a patient's care.*
## APPENDIX B: Service Descriptions and Needs Addressed - continued

<table>
<thead>
<tr>
<th>Service</th>
<th>Service Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Neuropsychology (Brain and Spine Center)</strong></td>
<td>The Section of Neuropsychology provides cognitive assessment and interventions for adult patients. Neuropsychological assessment is typically recommended when there are symptoms or complaints involving memory or other thinking skills, or changes in behavior, such as changes in concentration, organization, reasoning, memory, language, perception, coordination, or personality. These changes may be due to a variety of medical, neurological, psychological, or genetic causes. <strong>Neuropsychological assessment can:</strong> identify cognitive strengths and weaknesses, differentiate among illnesses and assist in treatment planning, establish a “baseline” that is objectively measured in order to identify subsequent changes, provide driving evaluations and assist in determination of other safety concerns, assist in capacity determination, and be used to plan neuropsychological interventions. Neuropsychological interventions offer management and intervention strategies for patients, caregivers, and the treatment team to maximize function and quality of life.</td>
</tr>
</tbody>
</table>
| **Oncofertility Clinic (Gynecologic Oncology Center)**                 | The Oncofertility Clinic provides rapid, streamlined access to fertility services for our reproductive-age patients with cancer. **Services include:**  
  - Fertility education and counseling prior to cancer treatment  
  - Assessment of fertility status  
  - Fertility preservation options including egg freezing, embryo freezing, ovarian tissue freezing and sperm banking  
  - Assistance with fertility after cancer treatment  
  - Exploration of alternative options for family building, including donor egg, donor sperm and adoption  
  - Referral to psychological and financial support services  
  - Collaboration and communication with your oncologist |
| **Pain Management Center**                                             | The Pain Management Center sees outpatients at MD Anderson’s main campus and has recently expanded outpatient services to the Houston Area Locations (HAL) in Katy, Sugar Land and the Bay Area. We also provide consultation services to adjust treatment plans for inpatients that experience pain related to their underlying disease. Optimum pain control is achieved by:  
  - Formulating an individualized treatment plan specific to each patient’s needs  
  - Using a combination of pain management strategies such as non-pharmacologic methods, pharmacotherapy, nerve blocks, implants and other procedural pain management techniques, including vertebroplasty  
  - Practicing the continuum of care, beginning with a comprehensive assessment  
  - Frequent reassessment to adjust treatment plans when necessary  
  - A multidisciplinary approach involving professionals from various disciplines, including psychiatry, neurosurgery and interventional radiology |

Continued on next page
APPENDIX B: Service Descriptions and Needs Addressed - continued

<table>
<thead>
<tr>
<th>Service</th>
<th>Service Description</th>
</tr>
</thead>
</table>
| Patient Advocacy      | Patient Advocates serve as a liaison between patients and MD Anderson. A Patient Advocate is assigned to every new patient to ensure all concerns are addressed in a professional, caring manner. Patient Advocacy provides:  
  - An opportunity, in a confidential setting, for patients and families to voice a complaint, concern, problem or request, and seek a resolution  
  - Information about resources and services available to patients and families  
  - Education about Patient Rights and Responsibilities  
  Patient Advocacy is responsible for the effective operation of our patient grievance process, including the review and resolution of patient grievances. The Center of Medicare and Medicaid (CMS) requires that hospitals acknowledge and respond, in writing, to all patient grievances. The President of MD Anderson has delegated this responsibility of reviewing and resolving grievances to the Department of Patient Advocacy. |
| Patient Guest Relations| The Patient Guest Relations is a unique department that serves as a liaison for Rotary House guests. We offer our services to any patient of MD Anderson. Our programs and activities are meant to relieve the anxiety of patients and caregivers, as well as serve as a distraction from the rigors of their daily schedules  
  **Special programs:**  
  - Care 4 the Caregiver Group and Well Wives Support Group  
  - Beauty makeovers  
  - Chair massages  
  - Origami classes  
  - Bingo nights, movie nights, and classes  
  We host a variety of musical and entertainment programs; our celebration of special occasions brings a “home away from home” feeling to our patients and their caregivers. |
| Psychiatry            | The Department of Psychiatry provides assessment and management of cancer-related behavioral symptoms, disorders, neuropsychiatric side effects of cancer and its treatment in patients of all ages, and at all points of disease trajectory. Anxiety, depressive spectrum disorders, and delirium are priorities. Management of primary psychiatric disorders is not a focus of the department but may be provided in certain clinical settings. A limited amount of work is done in management of cancer related emotional distress in caregivers. Treatment involves psychotherapy, medication, or both, and is coordinated with care provided by allied services. Inpatient care and emergency outpatient care are provided by the department’s adult and child psychiatry consultation services, which are available 24/7. Outpatient assessment and care is provided in the Psychiatric Oncology Center, which also offers specialty expertise in pediatric psycho-oncology, substance abuse assessment, and sexual dysfunction. |

Continued on next page
## Rehabilitation Services

The Department of Rehabilitation Services provides client-centered therapy using the disciplines of Occupational and Physical Therapy. Rehabilitation services provide therapy to increase engagement in client-identified activities and client-centered programming for increased independence in the performance of everyday activities. The therapist and client work together to identify strategies that allow for compensation of cognitive or physical impairments in everyday life. The department also provides specific programming for the management of lymphedema, fatigue and/or chemo-brain in daily living.

## Sexual Medicine Clinic (Genitourinary Center)

The Sexual Medicine Clinic provides care to all male patients who may have sexual dysfunction or infertility related to their cancers, cancer treatment, or any other etiology. We offer a comprehensive penile rehabilitation program catering to men who will have or have had radical prostatectomy, radical cystectomy and any other pelvic surgeries such as surgeries for rectal cancer, sarcoma or pelvic bone cancers. Men who have received pelvic radiation or systemic chemotherapy can also benefit from our penile rehabilitation program. We have dedicated nurses and an experienced team of advanced practice providers on our service who are easily accessible and eager to assist. Moreover, we collaborate with our psychologists and psychotherapists at MD Anderson to provide counseling for couples with special needs. The sexual medicine service is devoted to the restoration of the patient’s sexual function, thereby enhancing their qualities of life.

## The Sleep Lab

In the sleep clinic and sleep lab, pulmonologists evaluate and manage the effects of cancer and cancer treatment on patients with disordered sleep and cancer-related fatigue. This usually takes place with a consult to the pulmonologist. After an evaluation by the pulmonologist, further interventions or testing is determined. This may result in an overnight sleep study for our patients. The evaluation and subsequent sleep study, if needed, are performed several days apart.

## Social Work

As members of an interdisciplinary team, Social Work staff provides comprehensive psychosocial services to patients within their assigned services. Social work counselors provide:

- Individual and family counseling
- Education, support, and discussion groups
- Patient, caregiver, and family education
- Advance Directive assistance
- Resource information and referral
- Community outreach and education
- Special services and programs; for example, Adult Memorial Service
- Advance care planning

Social Work functions include:

- Psychosocial assessments
- Information and referral
- Education
- Counseling
- Triage to Psychiatry, Spiritual Care and Education, and other support services
- Psychosocial consultation

### Continued on next page
APPENDIX B: Service Descriptions and Needs Addressed - continued

<table>
<thead>
<tr>
<th>Service</th>
<th>Service Description</th>
</tr>
</thead>
</table>
| **Spiritual Care and Education**                  | For many people, cancer is more than just a disease - it’s a test of faith. Chaplains can help to find or reaffirm a belief in God or a Higher Power as part of the healing process. MD Anderson chaplains are here to guide patients on their spiritual journey, whatever path it may take. We nurture and re-kindled the spiritual resources of patients and caregivers and help them to connect with healthy spiritual traditions and communities. Chaplains support patients and caregivers in a manner that is inclusive of all spiritual traditions and practices. **Services also include:**  
  - Provide ecumenical and interfaith services  
  - Bedside visits  
  - Prayer and meditation  
  - Education and support groups  
  - Sacraments and rituals and local contacts for a specific faith tradition |
| **Supportive Care Program**                        | The Supportive Care Program focuses on improving the quality of life for patients with cancer and their families by reducing the physical and emotional burdens of illness through expert use of symptom management, supportive counseling and advance care planning. There are two main components to the program: The Outpatient Supportive Care Center for patient consultation and follow up which runs multiple templates per day, and six Mobile Consulting Teams for provision of consultations and follow up care to hospitalized adults, children and adolescents. Palliative care interdisciplinary team members are specially trained experts in this specialized area of medicine and work closely with the primary team to best support the patient. |
| **Tobacco Treatment Program (Cancer Prevention Center)** | The Tobacco Treatment Program provides tobacco cessation treatment services to MD Anderson patients, patients’ family members who live in the home with the patient, and employees. **Services include:**  
  - Assessment of tobacco use history  
  - Psychiatric disorders and symptoms  
  - Counseling and pharmacotherapy treatments  
  For MD Anderson patients, we will provide assessment and treatment of psychiatric disorders by an addictions psychiatrist if disorders/symptoms pose barriers to tobacco cessation. Counseling is provided by mental health specialists with expertise in the treatment of tobacco addiction disorders. Services are free of charge. |
Distress Screening and Psychosocial Management of Adult Cancer Patients

Disclaimer: This algorithm has been developed for MD Anderson using a multidisciplinary approach considering circumstances particular to MD Anderson’s specific patient population, services and structure, and clinical information. This is not intended to replace the independent medical or professional judgment of physicians or other health care providers in the context of individual clinical circumstances to determine a patient’s care.

SUGGESTED READINGS


Continued on next page
Distress Screening and Psychosocial Management of Adult Cancer Patients

Disclaimer: This algorithm has been developed for MD Anderson using a multidisciplinary approach considering circumstances particular to MD Anderson’s specific patient population, services and structure, and clinical information. This is not intended to replace the independent medical or professional judgment of physicians or other health care providers in the context of individual clinical circumstances to determine a patient’s care.

SUGGESTED READINGS - continued


UTMDACC Institutional Policy # CLN1167 – Patient Needs Screening Policy

UTMDACC Institutional Policy # CLN1183 – Suicide Risk/Precautions and Emergency Detention Policy


Copyright 2020 The University of Texas MD Anderson Cancer Center

Department of Clinical Effectiveness V5
Approved by the Executive Committee of the Medical Staff on 09/15/2020
Distress Screening and Psychosocial Management of Adult Cancer Patients

Disclaimer: This algorithm has been developed for MD Anderson using a multidisciplinary approach considering circumstances particular to MD Anderson’s specific patient population, services and structure, and clinical information. This is not intended to replace the independent medical or professional judgment of physicians or other health care providers in the context of individual clinical circumstances to determine a patient’s care.

DEVELOPMENT CREDITS

This practice consensus statement is based on majority opinion of the Psychosocial Council experts at the University of Texas MD Anderson Cancer Center for the patient population. These experts included:

Mark Berg, MA, BS (Employee Health)
Jan Blalock, PhD (Behavioral Science)
Cindy L. Carmack, PhD (Palliative Care Medicine)
Alejandro Chaoul, PhD (Palliative, Rehab, and Integrative Medicine)
Daniel E. Epner, MD, FACP (Palliative Care Medicine)
Susan P. French (Volunteer Services)
Wendy Garcia, BS
Katherine Gilmore, MPH, BA (Cancer Survivorship)
Wendy Griffith, MSSW, LCSW (Pediatrics)
Harjeet Kaur, MSN, RN, CNL
Margaret W. Meyer, MSSW, MBA (Social Work)
Alma Rodriguez, MD (Lymphoma/Myeloma)
Alan D. Valentine, MD (Psychiatry)

† Core Development Team
* Clinical Effectiveness Development Team