

without irradiation, is based on the clinical stage and histologic pattern. In unilateral disease, a large transabdominal incision is performed for optimum visualization of the abdominal cavity. The tumor, affected kidney, and adjacent adrenal gland are removed. Great care is taken to keep the encapsulated tumor intact because rupture can seed cancer cells throughout the abdomen, lymph channel, and bloodstream. The contralateral kidney is carefully inspected for evidence of disease or dysfunction. Regional lymph nodes are inspected, and a biopsy is performed when indicated. Any involved structures (such as part of the colon, diaphragm, or vena cava) are removed. Metal clips are placed around the tumor site for exact marking during radiotherapy.

If both kidneys are involved, the child may be treated with chemotherapy preoperatively to shrink the tumor, allowing more successful surgery ([Davenport, Blanco, and Sandler, 2012](#)). In some cases, a partial nephrectomy is performed, followed with additional administration of chemotherapy. When additional therapy is not effective, bilateral nephrectomy is performed with obligatory dialysis and a renal transplant is pursued ([Davenport, Blanco, and Sandler, 2012](#)).

Postoperative radiotherapy is indicated for children with metastatic disease ([Davenport, Blanco, and Sandler, 2012](#)). Chemotherapy is indicated for all children. The duration of therapy ranges from 6 to 15 months.

## **Nursing Care Management**

The nursing care of the child with Wilms tumor is similar to that of other cancers treated with surgery, irradiation, and chemotherapy. However, some significant differences are discussed for each phase of nursing intervention.

### **Preoperative Care**

As with many of the other cancers, the diagnosis of Wilms tumor is a shock. Frequently the child has no physical indication of the seriousness of the disorder other than a palpable abdominal mass. Because the parents usually discover the mass, the nurse needs to take into account their feelings regarding the diagnosis. Whereas some parents are grateful for their detection of the tumor, others feel guilty for not finding it sooner or anger toward the provider for