

Nursing Alert

When chemotherapeutic and immunologic agents with known anaphylactic potential are given, it is standard practice to observe the child for at least 1 hour after the infusion for signs of anaphylaxis (e.g., rash, urticaria, hypotension, wheezing, nausea, vomiting). Emergency equipment (especially blood pressure monitor, bag and valve mask, and suction) and emergency drugs (especially oxygen, epinephrine, antihistamine, aminophylline, corticosteroids, and vasopressors) must be readily available.

In addition to the many responsibilities during chemotherapy administration, nurses must also use safeguards to protect themselves. Handling chemotherapeutic agents may present risks to handlers and to their offspring, although the exact degree of risk is not known. The Oncology Nursing Society has published comprehensive guidelines for safe practice issues related to administration of chemotherapy.* They have also established safe management procedures for chemotherapy administered in the home.† Basic nursing guidelines are in the [Nursing Care Guidelines](#) box.

Nursing Care Guidelines

Handling Chemotherapeutic Agents

- Use great care and strict aseptic technique in handling chemotherapeutic agents to prevent any physical contact with the substance.
- Drugs are prepared in a properly ventilated room (which incorporates a protective front panel and vertical laminar airflow to reduce potential for inhalation during preparation).
- Wear disposable gloves and protective clothing and discard in special container after each use.
- Wear face and eye protection when splashing is possible, and wear a respirator when the risk of inhalation is possible.