

## **Sample Meal Plan Strategy**

### **Breakfast Ideas (7-8 AM)**

- **High-Protein Options:**
  - Greek yogurt parfait with berries and walnuts
  - Scrambled eggs with avocado and whole-grain toast
  - Overnight oats with nut butter and chia seeds
  - Protein smoothie with spinach, fruit, and plant-based protein
- **For Poor Appetite:** Nutrition shake or smoothie with added protein

### **Mid-Morning Snack (10-11 AM)**

- Handful of nuts and a piece of fruit
- Hummus with vegetable sticks
- Hard-boiled egg and whole grain crackers
- Greek yogurt with honey

### **Lunch Options (12-1 PM)**

- Salmon or sardine salad sandwich on whole grain bread
- Lentil soup with leafy greens
- Quinoa bowl with grilled chicken and roasted vegetables
- Bean and vegetable wrap with avocado

### **Afternoon Snack (3-4 PM)**

- Apple with almond butter
- Trail mix with dark chocolate pieces
- Cottage cheese with fruit
- Vegetable soup with added protein

### **Dinner Suggestions (6-7 PM)**

- Baked fish with sweet potato and broccoli
- Turkey meatballs with whole grain pasta and tomato sauce
- Tofu stir-fry with brown rice and mixed vegetables
- Slow-cooker chicken with root vegetables

### **Evening Snack (If Needed)**

- Small serving of cottage cheese
- Handful of nuts
- Warm milk with turmeric (may help with sleep)

## **Nutrition Strategies for Common Symptoms**

### **For Nausea**

- Eat small, frequent meals (every 2-3 hours)
- Cold or room temperature foods often better tolerated
- Ginger tea or candies
- Plain, starchy foods like crackers, toast, or rice
- Avoid strong smells and very spicy foods

### **For Fatigue**

- Prepare batch meals when energy levels are higher
- Keep easy-to-prepare, nutrient-dense foods on hand
- Consider meal delivery services or asking for meal support
- Nutrient-dense smoothies that require minimal preparation

### **For Altered Taste (Dysgeusia)**

- Use plastic utensils if metallic taste is present
- Experiment with different seasonings (citrus, herbs)
- Cold foods often have less pronounced taste changes
- Tart foods like pickles or lemonade can stimulate taste buds

### **For Swallowing Difficulties**

- Softer foods with added sauces or gravies
- Thicker liquids may be easier to swallow than thin ones
- Puree foods as needed while maintaining visual appeal
- Consult with a speech therapist for specific recommendations

## **Special Dietary Considerations with Medications**

### **Steroids (e.g., Dexamethasone)**

- Take with food to reduce stomach irritation
- Monitor blood sugar levels
- Limit sodium to reduce fluid retention
- Calcium and vitamin D supplementation often recommended
- Consider working with a dietitian to manage weight gain

### **Chemotherapy (e.g., Temozolomide)**

- Take on an empty stomach (1 hour before or 2 hours after eating)
- Stay well-hydrated before and after doses
- Bland diet on treatment days if experiencing nausea

- Increase caloric intake on non-treatment days if appetite is better

### **Anti-seizure Medications**

- Some may decrease absorption of certain nutrients (folic acid, vitamin D)
- Take at consistent times relative to meals
- Maintain adequate hydration
- Avoid grapefruit juice with certain medications (ask pharmacist)

## **Medical Follow-up Schedule and Guidelines**

### **Post-Diagnosis Initial Period (First 3-6 Months)**

#### **Neuro-oncologist/Neurologist**

- **Frequency:** Every 2-4 weeks during active treatment, then monthly
- **Focus:** Treatment monitoring, symptom management, medication adjustments
- **Key tests:** Neurological examination, medication level monitoring
- **Questions to ask:**
  - What symptoms should prompt an immediate call?
  - Are my current symptoms expected or concerning?
  - Should any medications be adjusted based on side effects?

#### **Neurosurgeon**

- **Frequency:** 2 weeks post-surgery, then at 1, 3, and 6 months
- **Focus:** Surgical site healing, residual symptoms, shunt function (if applicable)
- **Key tests:** Wound examination, neurological assessment
- **Questions to ask:**
  - Is my healing progressing as expected?
  - Are there any activity restrictions still in place?
  - When can I return to work/normal activities?

#### **Radiation Oncologist (if applicable)**

- **Frequency:** Weekly during treatment, then 1 month after completion
- **Focus:** Side effect management, treatment response
- **Key tests:** Skin and cognitive assessment
- **Questions to ask:**
  - How do I manage skin reactions?
  - When might I notice treatment-related fatigue improving?
  - What late effects should I watch for?

#### **Imaging Schedule**

- **Initial post-treatment MRI:** 2-6 weeks after completing radiation
- **Follow-up MRIs:** Every 2-3 months initially
- **Protocols:** With and without contrast, specific tumor protocol
- **Considerations:**
  - Schedule morning appointments to avoid waiting
  - Bring anti-anxiety medication if needed (with doctor approval)
  - Request results timeline at time of scheduling

## **Intermediate Follow-up Period (6-24 Months)**

### **Medical Oncologist/Neuro-oncologist**

- **Frequency:** Every 2-3 months
- **Focus:** Treatment effectiveness, long-term management plan
- **Key tests:** Blood work, neurological examination
- **Preparation:**
  - Keep symptom diary between appointments
  - Bring medication list with specific concerns
  - Have questions written down

### **Imaging**

- **Frequency:** Every 3-4 months if stable
- **Considerations:**
  - Same facility when possible for comparison
  - Request records be sent to all treating physicians
  - Consider requesting copy for personal records

### **Rehabilitation Services**

- **Physical Therapy:** As needed for mobility, balance, strength
- **Occupational Therapy:** As needed for daily living activities
- **Speech Therapy:** As needed for speech, swallowing, cognitive issues
- **Neuropsychology:** Every 6-12 months to monitor cognitive function

## **Long-term Follow-up (Beyond 2 Years)**

### **Neuro-oncologist**

- **Frequency:** Every 4-6 months if stable
- **Focus:** Surveillance, late treatment effects, quality of life

### **Imaging**

- **Frequency:** Every 4-6 months, extending to annual after 3-5 years of stability
- **Type:** MRI with and without contrast, specialized sequences as needed

## Primary Care Provider

- **Frequency:** Every 6-12 months
- **Focus:** Overall health, managing other conditions, preventive care
- **Importance:** Coordinates care between specialists

## Creating an Effective Follow-up System

### Appointment Management

- Use a dedicated health calendar (physical or digital)
- Schedule follow-up appointments before leaving the office
- Set reminders 1 week and 1 day before appointments
- Keep a master contact list of all providers

### Medical Records Organization

- Keep a binder or digital file with:
  - Pathology report
  - Operation reports
  - Imaging reports
  - Medication history
  - Treatment summaries

### Symptom Tracking

- Use a consistent system (app or journal)
- Rate symptoms on 1-10 scale
- Note timing relative to medications
- Track patterns related to activities or stress
- Bring this record to appointments

### Questions to Ask at Follow-ups

- What does this scan/test show compared to the last one?
- Have there been any changes that concern you?
- Should any medications be adjusted?
- What symptoms should prompt me to call between appointments?
- When should my next follow-up be scheduled?

## Important Reminders

- **Bring an advocate** to appointments when possible
- **Record important appointments** (with permission) to review later
- **Update your medication list** before each appointment

- **Inform all specialists** about changes made by other doctors
- **Never discontinue medications** without medical guidance
- **Report new symptoms promptly** rather than waiting for next appointment

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