



AWMA MODULE ACCREDITATION

Module SIX: Management of Oncological and Palliative Wounds

INTRODUCTION

Intended learning outcomes of MODULE

Completion of AWMA accredited 'Management of Oncology and Palliative Wounds' module provides opportunities for health professionals to develop and demonstrate knowledge, understanding, skills and other attributes in the following areas:

Intellectual skills-knowledge and understanding

Upon completion of an AWMA accredited 'Management of Oncology and palliative Wounds' module, it is anticipated that the participant will demonstrate a knowledge of :

1. Pathophysiology of cancer in relation to the skin
 - a. Tumour development
 - b. Primary skin tumours
 - c. Tumour infiltration of the skin through locally advanced, metastatic or tumour recurrence
 - d. Skin manifestations of haematological / lymphatic disorders.
2. Epidemiology of oncology wounds.
3. Principles of medical and palliative treatments.
4. Evidence-based treatment modalities.
5. Evidence-based symptom management: local and systemic.
6. Evidence-based local wound management.
7. Supportive care to patients and families.
8. The organisation of cancer and palliative services and interdisciplinary team working.

Practical Skills—Skills and Attributes

Upon completion of an AWMA accredited 'Management of Oncology and palliative Wounds' module, it is anticipated that the participant will demonstrate a knowledge of :

1. Acknowledge that expected clinical outcomes in the care of those with oncology / palliative care wounds may not include healing.
2. Appropriately assess a patient with an oncology wound and set mutually agreed goals for care.
3. Differentiate between multiple presenting symptoms.
4. Make effective treatment decisions, initiate further investigations and know when to refer to specialist services.
5. Monitor and evaluate treatment outcomes.
6. Identify the psychosocial impact that wounding has on the individual and society.
7. Evaluate the provision of cancer and palliative care services, and other services available for the assessment and management of patients with oncology wounds.

**MODULE SIX: MANAGEMENT OF ONCOLOGY / PALLIATIVE WOUNDS
MODULE CONTENT CHECKLIST**

Indicate inclusion of educational content by placing a tick in column A.

Indicate, where applicable, reasons for content not included by inserting a code (1-5)* in column C.

Note more than one code can be used.

*Codes are listed on page 5.

Inclusion (A)	Educational Content (B)	Reasons why content not included in course (Insert code 1-5)* (C)
	Overview / epidemiology -Introductory module plus:	
	Incidence and prevalence data for oncology / palliative wounds.	
	Anatomy and Pathophysiology -Introductory unit content plus:	
	Tumor development.	

	Tumours that infiltrate the skin through local advancement, metastases and tumour recurrence.	
	Skin cancers with wound formation: (malignant melanoma, squamous cell carcinoma, basalioma, Kaposi sarcoma).	
	Skin manifestations of haematological / lymphatic disorders.	
	Marjolin's ulcer in chronic wounds.	
	Principles of patient care (covered in Introductory unit content)	
	Assessment - Introductory unit content plus:	
	Diagnostic investigations.	
	Wound assessment in light of objectives.	
	Signs of tumour progression through the skin.	
	Signs and symptoms of tumour progression to internal organs and structure.	
	Prevention	
	Identification of risk factors (sun exposition in melanoma, early detection of potentially ulcerating malignant tumors).	
	Identification and actions in relation to signs and symptoms of tumour progression, e.g. spinal cord compression.	
	Medical Treatments	
	Principles and controversies of curative and palliative approaches to treatment.	
	Surgery.	
	Radiotherapy.	
	Neutron/ proton/electron therapy.	
	Chemotherapy.	
	Embolisation.	
	Laser treatments- dangers and potentials.	

	Topical chemotherapy/chemostatic drugs.	
	Brachytherapy.	
	Symptom Management	
	Assessment and differential diagnosis of presenting symptoms and how these may be interrelated, e.g. infection superimposed on active tumour infiltration of the skin.	
	Symptoms related to the underlying systemic disease e.g. pain.	
	Symptoms related to local conditions at the wound site e.g. stinging from local maceration, persistent bleeding, uncontrolled malodor and leakage of exudate.	
	Use of medical treatments for palliation of symptoms, e.g. radiotherapy for bleeding points and pain management.	
	Principles of the mediation of pain and pruritis: World Health Organisation analgesic ladder; topical opioids; Transcutaneous Electrical Nerve Stimulation (TENS); Acupuncture.	
	Pharmacology, pharmacokinetics, drug interactions.	
	Legal and ethical issues concerning the use of controlled drugs.	
	Palliative Care Drug Formularies: use of drugs on a named patient basis for applications for which they are not licensed e.g. Sucralfate suspension normally used for gastric ulceration applied as a topical preparation to control local bleeding.	
	Patient administered drugs, including continuous infusions and appropriate drug combinations.	
	Wound Management -Content covered in introductory module plus:	
	Involvement of the patient in setting goals for management of the wound.	
	Understanding of the functions of topical preparations and dressings.	

	<p>Assessment of problems / patient issues and concerns at the wound site that can be managed with topical preparations and wound dressings.</p> <ul style="list-style-type: none"> • Exudate control including peri-wound skin protection. • Bleeding. • Emergency measures. <ul style="list-style-type: none"> o Preventive measures (care with bathing, non-fibrous/ non-adherent dressings, cleaning techniques). o Palliative treatments (radiotherapy, embolisation, topical haemostats). • Malodour. • Pain minimisation at dressing change. 	
<p>Management of Infection -Content covered in introductory module plus:</p>		
	<ul style="list-style-type: none"> • odor control dressings. 	
<p>Specialist Intervention</p>		
	<p><i>Management of co-morbid conditions e.g.</i> Spinal cord compression.</p> <ul style="list-style-type: none"> o Recognition of symptoms and emergency actions required: immediate referral, high dose steroids. 	
	<p>Care of the patient with weakness and loss of mobility.</p>	
	<p>Care of the patient with cancer-related fatigue.</p>	
	<p>Stoma care.</p>	
	<p>Lymphoedema: prevention, treatment.</p>	
	<p>Nutrition/dietary considerations, including enteral feeding for patients with head and neck cancer.</p>	
	<p>Psychosocial problems; visibility of the malignancy, aesthetics, closeness/odor/depression, potential loss of self, body image, measurement of quality of life.</p>	
	<p>Consideration of Complimentary Alternative Medicine [CAM] options.</p>	

	Documentation e.g. assessment of risks; deep venous thrombosis, rupture of major blood vessels, pressure injury, infection, side-effects of immunosuppressive agents.	
	Referral criteria to further support services.	
	Psychosocial aspects of care (Covered in introductory unit)	

Code	*Reasons why content not included in course
1	Learners have prior knowledge
2	Content considered irrelevant
3	Lack of time to teach this content
4	Lack of expertise to teach this content
5	Other reasons (please specify below)