



BMT Newsletter

New Faces and New Places Await the UNC BMT Program

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Happy Spring to everyone! 2009 will be an exciting year for both our family of patients as well as our BMT Program team members as the year progresses!

We have all been patiently watching the N.C. Cancer Hospital being built over the past several years, and this August is the tentative move-in date. As we transfer care into this state-of-the-art facility, the anticipation is palpable as many of our team members had a hands-on role in its design.

Our in-patient unit will expand from ten (10) beds to sixteen (16), and our Outpatient Clinic space will become bigger as well.

Divided into a BMT Clinic/Exam area with a separate Infusion Room on the floor above, our clinic's flow will be reconfigured from its current design. We'll keep you posted as more specifics evolve, but our goal is that this transition will not disrupt the care of our patients whether in-patient or out-patient. The final product will only help us to provide even better care in the future—and in a much nicer environment!

2009 will also bring new faces to our program. Paul Armistead, MD, PhD has joined our adult team from M.D. Anderson and Stephanie Sarantopoulos, MD will

be joining us this summer from Dana Farber in Boston. Dr. Kim Kasow is set to join the pediatric program from St. Jude's Children's Hospital this Spring as the Pediatric Medical Director.

While new faces and new places are in store for us all this year, the program remains dedicated to providing seamless care to our patients. Change is always a challenge, but at its core is the ultimate goal of making this program the best it can possibly be!

May this year bring you and your family health, peace of mind and a vision for the future as we move down this road together!

Helpful Attitudes

- Make plans for the future
- Maintain personal connections. Don't withdraw!
- Take control—be in charge of your life as much as you can!
- Learn relaxation techniques
- Feed your sense of humor and laugh at something everyday!
- Take an active role in your illness management—you're part of the team!
- Be positive! Focus on what you can do, not what you can't do!
- Join a support group!



The new N.C. Cancer Hospital (left) and Physician's Office Building (right)

Unrelated Donor Q & A

If I have an unrelated donor, can I know who the donor is?

Only anonymous contact can be made for the 1st year after your transplant. These are the rules of the National Marrow Donor Program, and they are very specific; however, you can send the donor a card or letter that will go through your Transplant Coordinator, the NMDP Coordinator and the Donor Center Coordinator on the other side, but no identifying information can be shared.

What happens after one year?

After one year, you can contact your UNC Transplant Coordinator and fill out paperwork that lists what information you're willing to share with your donor. If they are willing to share their information with you as well, the Transplant Coordinator will notify you. At this point, you can start communicating independently of UNC or the NMDP.

What if my donor doesn't share their information?

Some donors may choose to remain anonymous. If that happens, there is nothing we can do to change their decision. In addition, some countries (though very few) do not allow any donor communication. If your donor comes from a country with these rules, your coordinator will let you know.

Transplant Recipient Robert Jewell meets Donor in New York City

What would you do if you needed a bone marrow transplant but were told that finding a match would be incredibly difficult because of your heritage? And how would you feel if, after 14 months of searching, you finally received a call that a perfectly matched donor had been found so that you could proceed with transplant? Robert Jewell, 67, dealt with all of those feelings when he learned his transplant would finally take place in the summer of 2007. He felt very fortunate because this procedure held his only hope for a cure from the non-Hodgkins lymphoma he had been diagnosed with in 2000. With the news that a perfect 10-out-of-10 match had finally been identified for him, Robert embarked on his transplant journey as the result of the kindness of someone he didn't even know.

After undergoing his transplant and surviving several life-threatening complications with the support of his wife Darlene and daughters Daiquiri, Monique and Derricka, Robert emerged from his transplant experience forever grateful to the donor who had saved his life. And as his one-year anniversary approached, Robert asked his transplant coordinator to provide his contact information to the National Marrow Donor Program (NMDP) so that he could share his appreciation personally with his donor. Instead of receiving her contact number in exchange, however, Robert received a call from the Icla da Silva Foundation in New York City asking if he would like to meet his donor in person at a celebratory ceremony that September. Without hesitation, Robert and his family said YES!

And on September 24, 2008, Robert, his wife and his three daughters were treated to a first class trip to NYC where they were scheduled to meet the donor. At an emotional dinner at Tavern on the Green, Robert met Romery Granado, a young woman originally from the Dominican Republic who now lives in the Bronx and gave Robert his second chance at life. After embracing to a standing ovation at the restaurant that lasted about 4 minutes, Robert was finally able to express his thanks face-to-face. "There wasn't a dry eye in the house – it was fantastic, just overwhelmingly emotional," said Robert. After Robert's unforgettable evening, the family embarked on a sightseeing tour of NYC the next day that helped make this memorable weekend even more special.

To this day, Robert and his wife speak of the experience with obvious joy. "This experience was just an everlasting one; we'll never forget it," said Robert. Their appreciation to the donor, as well as the Icla da Silva Foundation, can be summed in one word — everlasting! (More information on this organization can be found at <http://www.icla.org>)



Transplant Survivor Robert Jewell and his donor Romery Granado at Tavern on the Green in September



The Jewell Family in New York City

A Very Important Person

By Ashley Lane, RN, BSN

Merriam-Webster defines the role of the **caregiver** as “a person who provides direct care.” This simple definition actually contains much more significance for members caring for patients undergoing a Bone Marrow Transplant. What exactly are you, as caregivers, expected to do for your loved one, and how are you to handle these responsibilities while ensuring your needs as well?

Caregiver responsibilities begin as soon as the BMT process starts. Patients must choose a friend or family member during the initial intake process for this awesome responsibility and role. Our BMT patients must discuss all responsibilities with potential caregivers to ensure they know what their role entails. Caregivers can be one designated person or several as long as they are all committed to caring for the patient.

What does this caregiver role entail? Before discharge, teaching will occur that will enable you to care for the patient either in temporary housing close to Chapel Hill or at home. You will learn how to clean and change a central line dressing – an important process that demands careful attention and diligence. Additionally, you will be in charge of laundering the recipient’s clothes while in the hospital and after discharge. A number of other household duties will require your attention; however, you will receive instructions on how to ensure cleanliness of items and to ensure the safety of the transplant patient before discharge. Specific information can be found in our Patient Guide that’s given to you at the beginning the transplant process. The BMT Medical and Nursing staff is also available to answer any questions you may have, and please ask us!

While some family members and friends have the opportunity to stay with their loved one while in the hospital, a more vital role for the caregiver is after discharge. Each patient must have someone to care for them 24 hours a day for at least six to eight weeks after being discharged from the hospital. While this may seem like a tremendous time commitment, the healthcare team on the Bone Marrow Transplant Unit will prepare you to take on this responsibility.

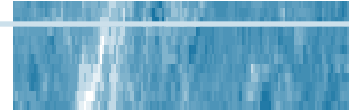
The most important role of the caregiver, and one that requires the most attention and presence while at home is being available for emergencies – serious or otherwise. You will receive instructions on the difference between a serious problem and an emergency as well as whom to call for each. While it may not be feasible to maintain the 24-hour per day presence suggested in the Patient-Caregiver Contract, make plans to have yourself, or another person knowledgeable about your situation, within 20 minutes of home. This will enable you to fulfill your needs outside the home while still being available if needed by your loved one.

While you care for your loved one, it is vital that you care for your needs as well. The role of the caregiver is important, but you cannot perform to the best of your abilities unless you care for yourself first. There are community support groups available to meet with others dealing with a similar situation and who can help support you through this process; your social worker will have those details for you. Take time out to exercise, eat a proper diet, and get adequate sleep. This may be difficult, but even a small effort is good. Support is a two-way street in this process: you must support your loved one, but they must support you as well. Know your limits, ask for help, and take a break when you can. Finally, know that you as a caregiver are engaging in an awesome, challenging, yet rewarding time in your loved one’s life – know that YOU are special and we thank you for your decision!

*Don't forget! Caregivers / Family Support Group each
Wednesday at 3pm in the BMT Conference Room*



*"We deceive ourselves when we fancy that only weakness needs support...Strength needs it far more."
-Sophie Soymonof*



Caregiver Responsibilities

Providing transportation to and from the BMT Outpatient Clinic and tracking appointments

Observing for changes in the patient's condition and reporting it to the doctor.

Calling for medical care if needed.

Assisting the patient with central line catheter care.

Monitoring medication schedules.

Assisting with meal preparation and diet restrictions.

Assisting the patient with personal hygiene needs if necessary.

Assisting with medical and financial planning.

Serving as a communication link and advocate.

Being physically present with the patient.

Providing encouragement.

For more information on caregiving, please contact our BMT Social Worker, your Nurse Coordinator or the National Bone Marrow Transplant Link at <https://nbmtlink.readyhosting.com/resources/support/cg/index.htm> to download or order a copy of their **Caregiver's Guide**

News from the BMTU



Congratulations to Ashley Farmer, RN, BSN, OCN who was the first Oncology Service Line Employee of

the Quarter. Ashley's name and picture will be displayed on plaques on the BMTU and on 6 East. She was presented with a \$50 gift card at a luncheon in her honor on January 13th. Quotes from Ashley's nominations include the following:

"Ashley is a wonderful asset to our BMT family. She is dedicated to her patients and the care that they receive." *"Ashley does it all and does it well! She always has a can-do attitude."* *"Ashley is a positive and motivating force on the unit."* (We couldn't agree more!)



We welcome **Haejoung Jeon, RN, BSN** to our BMT team! She comes to us with

Oncology and BMT experience. Haejoung was born in South Korea and moved to the US in 2002. She has two girls, ages 10 and 12.



We welcome **Gerry Hernandez, NA**, to our BMT team! Gerry has NA experience

and is enjoying getting to know the Oncology/BMT patient population. Gerry was born in the Philippines. He loves to play baseball and plays the guitar and drums as a hobby.



Congratulations to **Barbara Eron, RN, BSN, OCN**. Barbara presented at the American Society of Blood and Marrow Transplantation Conference in Tampa, Florida this past February. She facilitated a Round Table discussion for BMT nurses from the United States and beyond about the management of hemorrhagic cystitis.



Angela Spruill, RN, BSN, OCN was recently honored to be chosen one of North Carolina's Great 100 Nurses! Angela and her family at-

tended a gala in Greensboro where she received her award. Angela was also honored with an Excellence Award by Nursing Spectrum magazine.



Congratulations to **Kelly Colvin, RN, BSN, OCN** on the birth of her daughter Delaney on July 20th! After enjoying her maternity leave,

Kelly is back with us now, and we're enjoying hearing "Delaney Stories"!



Carol Marlow, RN & Ann Hornback, RN both successfully sat for the Oncology Certified Nurse exam & have earned the designation of OCN! **Congratulations!!!!**



Chaplain's Corner



Would you like your story told in a future newsletter? Do you have an idea for an

article? If so, please

contact Sam at

ssharf@unch.unc.edu or

919-966-7516

EVERYDAY is SACRED

By Patricia Cadle, Oncology Chaplain

With the beginning of a new year, many thoughts come rushing into my mind concerning the possibilities for the next 365 days. Many of us spend time during this season examining the events of the past year. Evaluating and determining how those events have measured up to our expectations, how they have influenced and changed our lives. Some of us make resolutions we hope will give us direction and goals to meet, keeping us on track in the coming year. No matter what your tradition(s) around this time of year, remember that everyday is sacred...filled with possibilities.

There is a story that comes to mind as I look forward to the coming year and how I choose to spend each and every day. It

is the story of the three bowls. The first bowl is upside down, so that nothing can be placed in it. Anything poured onto it will run off down the sides. The second bowl is right-side up, but cracked and filled with debris. Anything placed in this bowl gets lost in the residue or leaks out the cracks. The third bowl is clean and whole, no cracks or holes. This bowl is ready and able to receive and hold whatever is poured into it. Sometimes we are like the first bowl, we close ourselves off from life's possibilities; we become so busy being "productive" that we may not notice the very thing we need when it presents itself. Sometimes we are like the second bowl - our time becomes so

filled with useless "stuff" and our minds focus on all the brokenness in our lives and in the world that we are unable to see or appreciate all the things that are whole and pleasing. And sometimes, when we are at our best, we are like the third bowl, open and ready for all the possibilities in life. When we are this bowl, we are able to be present to what we are doing and being. We are whole, and every opportunity is a chance to be useful and successful. What bowl are you most like?

This year imagine and be open to the possibilities. Be mindful of what you are doing and becoming. Use every opportunity to be the very best you can be. And may blessings abound!!