



**THE PEOPLE YOU MIGHT
MEET ON YOUR BREAST
CANCER JOURNEY:
YOUR HEALTHCARE TEAM**

During the different stages of my breast cancer journey, I will meet a number of healthcare professionals. Each healthcare professional plays an important role in helping me. This resource gives me brief information about possible members of my healthcare team, what they do, when I might meet them during my cancer journey, and a few questions I can ask them.

Throughout the different sections, I might see bolded words that I do not know. At the end of each section, the bolded words will be defined in a box called: What Do These Words Mean. If I am still not sure about what a word means, I should ask a member of my healthcare team about it.

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Finding a lump: What do I do next?

If you do not have a family doctor and would like help finding one, please go to page 25 for information to help you do that.

Family Doctor or Primary Healthcare Provider



What is my family doctor or my primary healthcare provider's role?

My family doctor or primary healthcare provider looks after my general healthcare.

If the results from a **mammogram** or **clinical breast exam** are suspicious, then the family doctor or primary healthcare provider may send me to a radiation technologist for more testing. This can include more mammograms, an **ultrasound**, **MRI**, and possibly a **biopsy**.

If these test results are positive for breast cancer, my family doctor or primary healthcare provider refers me to a surgeon.



When do I meet with my family doctor or primary healthcare provider?

I should meet with my family doctor or primary healthcare provider at least once a year for a checkup. These checkups include a clinical breast exam.



Possible questions to ask my family doctor or primary healthcare provider:

1. What can I expect from a referral with a surgeon? If I wanted a second opinion, would you be able to give me a referral for a different surgeon?
2. What role does my family doctor or primary healthcare provider play during and after my treatment?
3. Can I get a copy of my mammogram, ultrasound, MRI, and/or biopsy results for my records?

Finding a lump: What do I do next?

Other members of the healthcare team

Radiation Technologist



What is the radiation technologist's role?

The radiation technologist is a member of my healthcare team who usually does the **mammograms** and other imaging tests.

The results of these tests are sent to a radiologist.

Radiologist



What is the radiologist's role?

The radiologist is a doctor who reads and makes sense of the results from imaging tests, such as mammograms. He or she can also do **biopsies**.

If the imaging and/or biopsy results are positive for breast cancer, the test reports are sent back to my family doctor or primary healthcare provider who refers me to a surgeon.

Getting the news: I have breast cancer



Me

If the results from the imaging and/or biopsy tests are positive for breast cancer, then my family doctor or primary healthcare provider should refer me to a surgeon as soon as possible.



Here are some things that other women with breast cancer think are useful to do throughout the journey:

1. I can learn about my cancer so that I make the right decisions about treatment.
2. I can talk to my healthcare team about any questions and concerns that I have. That is why I should write these questions down as soon as I think of them.
3. I can write down all the different appointments to stay organized.
4. I can ask my healthcare team how to contact them between my appointments if I have questions.
5. It is very important to keep my body as healthy as I can while I have breast cancer. I can do this by exercising, eating well, and managing my stress.

Surgery: Taking out the tumour

In cancer treatment, a patient might need:

- chemotherapy or
- radiation or
- chemotherapy and radiation.

This will be determined by the results of the pathology report after you have surgery. Treatment after the surgery can stop the cancer from spreading to other parts of the body and lower the chances of it coming back.

Surgeon



What is the surgeon's role?

A surgeon is a doctor who treats my cancer through surgeries that remove lumps or tumours from my body.

The surgeon does procedures such as **lumpectomies**, **mastectomies**, **axillary dissections**, and **sentinel node biopsies**.

The surgeon talks about my imaging and biopsy test results with me.



When do I meet with the surgeon?

If the test results from the imaging tests and/or **core biopsy** are positive for breast cancer, my family doctor or primary healthcare provider refers me to a surgeon.

It is very important for me to keep this appointment because I will find out more about my breast cancer and what kind of treatment I will need.

Surgery: Taking out the tumour



What do these words mean?

Invasive breast cancer: Invasive breast cancer is a cancer that has spread outside of the part of the breast that carries milk (milk ducts) or makes milk (lobules) into the rest of the breast. This type of cancer can grow bigger, cause a lump, and spread to other parts of the body.

Non-invasive breast cancer: A non-invasive breast cancer is still inside the part of the breast that produces milk (lobules) or carries milk (milk ducts). It has not spread to the rest of the breast or outside of the breast.

Lymph nodes: Lymph nodes are tiny bean-like structures that fight infections and are found in different parts of the body, such as the armpit.

Breast reconstruction: Breast reconstruction is a surgery that rebuilds the breast. This surgery can be immediate (done at the time of mastectomy) or delayed (done some time after recovery from mastectomy). If I want breast reconstruction, it is important to talk about which timing would work best for me with the surgeon and/or oncologist (cancer specialist), and to get a referral to a plastic surgeon.

Oncology nurse: An oncology nurse cares for patients living with a cancer diagnosis. He or she can give me chemotherapy treatments as well as educate and support me throughout treatment and recovery.

Patient navigator: In some hospitals, a patient navigator works with my healthcare team to guide me throughout my breast cancer journey. He or she helps me deal with concerns that I might have related to my breast cancer diagnosis and treatments, and can put me in touch with different types of support resources.

Oncology social worker: An oncology social worker helps my family and I cope with breast cancer and its treatments. He or she can connect me with resources related to financial aid, drug benefits, and community support.

Surgery: Taking out the tumour



What do these words mean?

Stage: The stage of my breast cancer tells me the size of the tumour and if it has spread outside of my breast.

Grade: The grade of my breast cancer tells me how fast the cancer is growing.

Pathology report: A pathology report has information from my surgery and all of my test results. It can have information from the core biopsy, sentinel node biopsy, lumpectomy or mastectomy, and axillary dissection. My pathology report is very important because it has specific information about the size of my tumour, if it has spread, and much more. This report is what the oncologist and/or surgeon use to figure out if I need more treatment (i.e., chemotherapy, radiation, additional surgeries).

Lymphedema: Lymphedema is the swelling that can occur in the arm or the breast after the lymph nodes are taken out.

Medical Oncologist: The medical oncologist is a cancer specialist who treats cancer using drugs.

Radiation Oncologist: A radiation oncologist is a cancer specialist who treats cancer using high-energy X-rays.

Surgery: Taking out the tumour

Other members of the healthcare team

Registered Nurse



What is the registered nurse's role?

A registered nurse is a nurse who works with the surgeon and the rest of the healthcare team to help me during and after my surgery.

He or she can also teach me more about my cancer and its treatments.

For more information on nurses, see **Oncology Nurse**, page 19.

Pathologist



What is the pathologist's role?

The pathologist is a doctor who studies the cancer tissue that was removed in surgery and writes a summary that describes the stage of my cancer and if I will need more treatment. This is known as my **pathology report**.

The report is sent to my surgeon who talks with me about my pathology report, usually within two weeks after my surgery.

After the surgery: Learning about additional treatment

Every breast cancer is different. Depending on my diagnosis and pathology report, it is possible that I might or might not need more treatment after my surgery. If I do need additional treatment, here is some information about possible members of the healthcare team.

It is important to remember: If more treatment is needed after surgery, I might work with both the medical and radiation oncologist or just one of them. It depends on my diagnosis and the treatment options I talk about with my oncologist.

Radiation Oncologist



What is the radiation oncologist's role?

The radiation oncologist is a cancer specialist who treats cancer using high-energy X-rays. This is known as **radiation therapy**. This treatment can kill cancer cells in specific parts of the body and can help lower the chances of the cancer coming back.



When do I meet with the radiation oncologist?

Usually, I meet with my radiation oncologist after my surgeon or medical oncologist refers me.



Possible questions to ask the radiation oncologist:

1. What is radiation therapy? Are there different types? Which radiation therapy are you suggesting is best for my breast cancer diagnosis?
2. Is radiation therapy harmful? What are the side effects?
3. How long is each radiation therapy session? How many sessions will I have in total?
4. It is not easy for me to get to all my appointments. Are there any resources available to me for transportation?
5. What do I do if I notice changes in my health or body after the treatment (i.e., nausea, pain, changes in sleep)? Who do I call? Where can I find more information about this?

After the surgery: Learning about additional treatment

Medical Oncologist



What is the medical oncologist's role?

The medical oncologist is a cancer specialist who treats cancer that may have spread to other parts of the body. The medical oncologist does this through the use of different drugs. Some drugs are used to kill cancer cells and to stop the cancer from spreading to other parts of the body. This is known as **chemotherapy**. Other drugs are used to block hormones that cause cancer to spread to other parts of the body. This is known as **hormone therapy**. These treatments can help lower the chances of the cancer coming back.



When do I meet with the medical oncologist?

I meet with the medical oncologist after my surgeon refers me, usually (but not always) one month after surgery. If it is needed, chemotherapy usually starts four to twelve weeks after surgery.



Possible questions to ask the medical oncologist:

1. What treatment is best for my breast cancer diagnosis? What are the side effects? How will I feel after the treatment?
2. Could the treatment cause other health problems (i.e., lung, heart, kidney, damage/disease, trouble getting pregnant)?
3. How likely is it that the cancer will come back after this treatment? How will we know if the treatment is working?
4. Will I still need **radiation therapy** after this? Why or why not?
5. What do I do if I notice changes in my health or body after the treatment (i.e., fever, long-lasting diarrhea, shortness of breath)? Who do I call? Where can I find more information about this?

Treatment after surgery: Support

Oncology Nurse



What is the oncology nurse's role?

An oncology nurse cares for patients living with a cancer diagnosis.

He or she is trained to give me the **chemotherapy** treatments as well as educate and support me throughout treatment and recovery.

He or she can connect me with resources related to financial aid, drug benefits and community support. I will probably see the oncology nurse more than I see the oncologist.



When do I meet with the oncology nurse?

Usually, I meet an oncology nurse at my first chemotherapy and/or **radiation therapy** session.

I should be sure to tell the oncology nurse about:

- how I felt after my treatment
- problems I might be having related to living with cancer and going through treatment
- questions I have about my medicines and how to take them



Possible questions to ask the oncology nurse:

1. Can you talk to me about the side effects of my treatment? What happens if I have nausea or vomiting during or after my treatment session? What happens if I come down with fever?
2. When and who should I call if I have any of these side effects?
3. Are there any things I should avoid doing before, after, and during my treatment sessions?
4. I might see different nurses during the course of my treatments. Are there any details that I should remember to tell them?
5. What are some ways that I can take extra good care of myself? Are there any good ways to cope that you recommend?
6. How can I get in touch with an **oncology social worker**?
7. It is not easy for me to get to all my appointments. Are there any resources available to me for transportation?

Oncology Social Worker



What is the oncology social worker's role?

An oncology social worker can help me deal with the non-medical aspects of breast cancer. He or she can connect me with resources related to financial aid, drug benefits and community support.



When do I meet with the oncology social worker?

Usually, I have to ask for an oncology social worker. I can talk to my **oncologist** or **oncology nurse** about how to get in touch with one.



Possible questions to ask the oncology social worker:

1. What are some ways of dealing with the stress related to my breast cancer diagnosis?
2. Can you put me in touch with someone who has gone through the breast cancer journey?
3. Can I get financial aid? What is **Trillium**? What are **STD**, **LTD**, or **EI** sick benefits? How do I apply? Can you help me with the paperwork related to these benefits?
4. How will my cancer treatments affect my relationship with my partner and/or family? How can I talk about breast cancer with my children?
5. Who and where can I go to for emotional support? Are there any local resources that are available to me?

Trillium, STD, LTD and EI are just some examples of financial aid that might be available to me. That is why it is important to talk to my social worker to find out if I can get any financial aid.

Resources and coping: Living with cancer

Not all hospitals have a patient navigator. Some might have a nurse navigator or social worker instead. All three of these healthcare team members have similar roles and it is important to ask if any of them are available.

Patient Navigator



What is the patient navigator's role?

In some hospitals, a patient navigator works with my healthcare team to guide and help me understand all the different parts of my breast cancer journey.

He or she also tells me about available support resources and helps me deal with concerns that I might have related to my breast cancer diagnosis and treatments.



When do I meet with the patient navigator?

Usually, I will be given the information about the patient navigator before my surgery. If I am not sure, I should ask.



Possible questions to ask the patient navigator:

1. What can I do to ease the side effects of my **chemotherapy** treatment (i.e., fever, long-lasting diarrhea, shortness of breath)?
2. Who and where can I go to for emotional support?
3. When can I return to work? When can I return to my exercise routine?
4. How often will I see my **oncologist** after my active treatments are over?
5. Can you give me resources related to the different parts of my breast cancer journey? Where can I find more information?

Resources and coping: Living with cancer

Other members of the healthcare team

Oncologist



What is the oncologist's role?

It is normal to have concerns about the cancer coming back, but I should know that my healthcare team will monitor me closely in the first five years after my treatment. That is why it is a good idea for me to discuss a follow-up plan with my oncologist. This will allow the healthcare team to:

- monitor for long term side effects
- make sure I get help if I need it

The oncologist can also tell me about available support resources and help me deal with concerns related to my breast cancer diagnosis and treatment.

Family Doctor or Primary Healthcare Provider



What is my family doctor or primary healthcare provider's role?

My family doctor or primary healthcare provider is also important to my healthcare. Getting regular check-ups with my family doctor or primary healthcare provider is part of my ongoing care after cancer treatment. How often I will have these visits will depend on the type of breast cancer I have. I should ask my family doctor or primary healthcare provider about how often I might have these check-ups.

It is important to know who is going to monitor or order my follow-up tests. I should ask my oncologist and my family doctor or primary healthcare provider about this.

How do I find a family doctor?

If you do not have a family doctor, you can go to the this website to search for one: <http://www.cpso.on.ca/docsearch/>. Just fill out the information and press submit to find a family doctor that is close to where you live. If you are having trouble, please call 416-967-2603.

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