

Article addresses management of cancer care during COVID-19

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assist patients with mild symptoms. A strict "stay at home when ill" policy and access to testing for symptomatic staff can limit exposures. Other infection control measures include restriction of travel and enabling work from home. All well-patient visits should be rescheduled or transitioned to telemedicine. Increased hours and acute evaluation capabilities are necessary to preserve emergency departments and resources. Clinical decisions regarding delay of treatment should include considerations about the impact of delays. Proactive discussions relating to ethical considerations of treatment are encouraged.

"Our overarching goal is to keep our [cancer patients](#) and staff safe while continuing to provide compassionate, high-quality care under circumstances we've never had to face before," a coauthor said in a statement.

More information: [Abstract/Full Text](#)

(HealthDay)—Management of cancer care during the coronavirus 2019 (COVID-19) pandemic is addressed in a special feature article published online March 20 in the *Journal of the National Comprehensive Cancer Network*.

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Masumi Ueda, M.D., from Seattle Cancer Care Alliance, and colleagues discuss the management of [cancer](#) care during the COVID-19 pandemic, while focusing on some of the anticipated challenges and measures to address these concerns.

The authors note that anticipated challenges for [oncology patients](#) include expected staff shortages and shortages of beds and resources due to a predicted surge of COVID-19 patients. To be able to continue to provide [cancer treatment](#) for patients, infection and [environmental control](#) are needed, including early identification and separation of patients with COVID-19. Patient education and family education are needed for prevention of infection; a phone triage line can

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