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Elsevier hereby grants permission to make all its COVID-19-related research that is available on the COVID-19 resource centre - including this research content - immediately available in PubMed Central and other publicly funded repositories, such as the WHO COVID database with rights for unrestricted research re-use and analyses in any form or by any means with acknowledgement of the original source. These permissions are granted for free by Elsevier for as long as the COVID-19 resource centre remains active. service evaluation will be conducted to assess the effectiveness of the ANP role, which furthermore may identify areas for development.

Conclusions: Clinical research nursing has evolved into a specialised area of practice and the introduction of the ANP role is a direct result. Implementing the ANP role in the Gastrointestinal & Lymphoma Unit will expand service delivery, provide clinical support to doctors and maintain continuity of care by improving the overall experence for our trial patients.

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CN46 Catheter-related venous thrombosis: Experience with blue advance peripherally inserted central catheter (PICC) in a day hospital during the pandemic

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Background: The PICC in our Day Hospital (DH) has become the central line of choice for the therapeutic management of oncological and hematological patients when the duration does not exceed 6 months. The impact of COVID-19 in these patients led to an increase in risk factors for the occurrence of venous thrombosis (VT) and catheterrelated venous thrombosis (CRVT), forcing admission-like immobility, intensification of supportive treatment with granulocyte colony growth factors (G-CSF) and a higher number of PICC insertions in metastatic patients. Given these circumstances, it was decided to use the Blue Advance PICC with antithrombogenic coverage. The objective was record the incidence of symptomatic CRVT related to Blue Advance PICC in oncological and hematological patients in active treatment, as well as the incidence of other complications and causes of withdrawal.

Methods: A retrospective observational study was performed, in a consecutive series of patients from November 2019 to June 2021. All catheters were inserted in DH for oncospecific treatment, using PICC Blue Advance Teleflex Medical®, 4'5Fr, 1 lumen, by ultrasound-guided puncture and tip confirmation by fluoroscopy. Variables recorded: demographic data, diagnosis and stage, treatment administered, date of insertion and removal, vein diameter, cause of removal and complications.

Results: A total of 295 blue PICC were analyzed, with a total length of stay of 46,150 days and a mean of 156 days per catheter. Ninety-eight percent of the PICCs were placed at the first attempt, and the predominant access was the basilic and brachial veins, with diameter between 2.9-5.6mm. There were 9 cases of symptomatic CRVT (3%, 0.19/1000 catheter days), confirmed by Echo-Doppler, which din otr require catheter removal and treatment was completed. Six CRVT were diagnosed between the first and third week of insertion in female patients, with cytostatic Adriamycin and G-CSF. The main cause of withdrawal was end of treatment in 94.9%.

Conclusions: The use of the antithrombogenic Blue Advance PICC during the pandemic period, despite the increase in risk factors, kept the incidence rate of symptomatic CRVT unchanged in our historical pre-COVID cohort.

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CN47 Future-proofing the Irish Association for Nurses in Oncology: Identifying the professional and educational needs of members

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Background: The Irish Association for Nurses in Oncology (IANO) was established 40 years ago when specialist cancer nursing was in it's infancy in Ireland. The IANO supports cancer nurse education and provides opportunities for professional development. The IANO is structured into Regional Networks and Special Interest Groups.

Cancer nursing has evolved significantly over the past few decades, and the education and professional development of Irish cancer nurses may have changed. Therefore, the IANO conducted a survey in 2021 to establish the professional needs of members so to identify areas for development within the organisation.

Methods: A non-probability purposive sampling method was employed. A questionnaire was designed for the purpose of the study and ethical approval was obtained. Members were invited to participate anonymously and consent via the Survey Monkey platform. Data was collected over a four week period.

Results: All members on the IANO database (n=197) were invited to participate. Twenty percent of members completed the survey. Seventy nine percent of respondents were over 35 years and 36% had less than 5 years of experience. Forty six percent of respondents engage with their Regional Networks for professional development, networking and access to education. The IANO website was accessed by 61% of respondents between 1-5 times per year. Respondents indicated a lack of confidence in applying for educational bursaries. Seventy four percent of respondents receive a copy of the IANO newsletter. However, 45% do not feel confident contributing to the newsletter.

Conclusions: The results indicate that cancer nurses derive both professional and educational benefits from having membership of the IANO. The findings suggest that members utilise the IANO website and newsletter to inform themselves of these opportunities. However, members lack confidence in applying for educational bursary opportunities and contributing to the newsletter. To future-proof the IANO attention should be focused on member engagement with the Regional Networks and the IANO website, and developing the confidence of cancer nurses in availing of professional and educational opportunities.

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Achieving global standards in pediatric oncology nursing: Pediatric oncology clinical profile of Turkey

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Background: Nurses have an important role in improving the quality of care for pediatric oncology patients. In this context, it is important for nurses to apply care within the framework of international standards. This study aimed to examine the status of reaching the global nursing standards determined by SIOP in pediatric oncology nursing in Turkey.

Methods: The descriptive study was conducted with nurse managers in 62 pediatric oncology centers in Turkey between February and May 2022. The 'Information Form' and six global nursing standards created by the SIOP Nurse Working Group were transformed into a form by the researchers. were used for data collection. Participants were asked to respond as 'Available' or 'Not Available' in the clinics of these standards. The data were obtained online by reaching the nurse managers in cooperation with the Oncology Nursing Association and the Turkish Pediatric Oncology Group.

Results: It was determined the mean number of beds in the clinics was 21.73 ± 11.28 , the number of nurses working in the clinics was 14.00 ± 6.96 , there were no specialist nurses in 68.2% of the clinics, and specialist nurses were included in the rotations in 18.2% of the clinics. It was found that 27.3% of the clinics met the nurse standard for five patients, I72.7% of the clinics applied for an orientation program, 77.3% of clinics accepted nurses as part of a multidisciplinary team, 63.6% had all resources available for safe pediatric oncology care, 63.6% adopted evidence-based pediatric oncology nursing policies and procedures.

Conclusions: It was determined that it was insufficient to meet the standards developed for pediatric oncology nurses in pediatric oncology clinics in Turkey. It was determined that the number of specialist nurses working in the clinics is low, the number of patients a nurse takes care of is high, and the nurses are not financially supported enough in their research to develop nursing policies and procedures. It is important that managers and associations have action plans that require pediatric oncology nurses to reach global standards.

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