

# Planning Checklist

## for Your Hospitalization for Stem Cell Transplant

This information sheet highlights key topics about your hospital stay for stem cell transplantation. Complete information is in **Stem Cell Transplantation: An Information Guide for Patients and Caregivers**. Please ask a member of your care team if you have questions at any time.

- **Insurance coverage:** Making changes to your health insurance coverage may cause delays in the transplant process. Please speak with your financial counselor before making changes to your health insurance so we can discuss coverage options with you and avoid delays.

- **Packing for the hospital:** Hospital gowns, pants, socks, towels, bed linens, and toiletries are provided for you while you are in the hospital. If you would like to bring your own clothing to wear, they must be freshly laundered in a washing machine and dryer, and put in a clean, washable tote bag or hard suitcase that can be wiped with a cleaning wipe. Clothes that touch your skin will be placed in a bag daily and should be taken home for laundering by a caregiver whenever possible during your hospital stay.

Do not bring money or valuables with you. However, bring your insurance cards and a credit card to pay for your medication co-pays or ask your caregiver to bring them when needed.

You may also bring your smart phone, tablet, or laptop as Wifi is available in your hospital room.

**\*\*A list of what to bring and what not to bring is in the Preparing For Transplant section of the Guide.**

- **Length of hospitalization:** Though every patient is different, most patients are ready for discharge between 11 to 16 days after the day of stem cell infusion. Patients who receive reduced-intensity regimens, also known as "RIC Allo," may be discharged soon after their stem cell infusion. Please note that your discharge date needs to be flexible based on your particular type of transplant and your recovery. In most cases, the length of your stay will be determined by your blood counts and how you are feeling. If you have questions or concerns about your discharge time frame, please discuss with your clinical team when you are admitted.

- **Discharge planning:** Your care team will keep you and your caregiver updated as your discharge date approaches, and you will know your expected discharge date 48-72 hours in advance. Prior to leaving the hospital, you will meet with a dietitian to review food guidelines after transplant; a physician assistant, nurse, physician, or pharmacist to discuss medications; and an inpatient nurse for general precautions information. It is recommended that your caregiver attend these meetings, or participate by phone. We will work with you and your caregiver to schedule time in advance of your discharge date.

### Remember:

- Your medications are usually delivered to your room. You will need to arrange for co-payments in advance of delivery. In some cases, your caregiver may need to pick them up at the pharmacy and bring them to the hospital.
- If your prescription costs are different than what was outlined to you by our pharmacy benefits specialists, be sure to raise this with your care team.
- Our goal is to have you ready for discharge by 11 a.m.; your ride home should arrive before that time to pick you up.



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- **Visitor guidelines:** Friends and family members are welcome to visit you during your hospitalization as long as they are feeling well and free of infection or exposure to communicable diseases. No one, including your primary caregiver, may stay in your hospital room overnight.

**\*\*Visitor guidelines are outlined in the During Inpatient Transplant section of the Guide. Visitor guidelines are subject to change. Ask your care team if you have questions.**

- **Treatment side effects:** Common chemotherapy side effects include nausea, fever, diarrhea, and rashes. During the stem cell infusion, you may experience fever, flushing, headache, or chills. After the chemotherapy and stem cell infusion, and before your cell counts recover, you may develop fever, fatigue, difficulty sleeping, and difficulty eating or drinking due to mouth sores or throat pain. Your care team will support you to help manage these side effects.

- **Diet restrictions:** While in the hospital, you will be on a special, low-bacteria diet to reduce your risk of infection while your immune system is recovering. A dietitian will work with you to order foods that meet our program's guidelines. After discharge, there are also restrictions on what you may/may not eat for a period of time.

**\*\* More information on what you can/cannot eat while in the hospital is in the During Inpatient Transplant section of the Guide. Post-discharge nutrition guidelines are in the Eating Safely at Home After Stem Cell Transplant section of the Guide. Ask your nurse about our online videos related to post-transplant nutrition guidelines.**

- **Getting your home ready for your return:** Your home needs to be thoroughly cleaned before you return home from the hospital. Cleaning should focus on the removal of mold or mildew, and on the living areas where you will be spending time. It is important to make arrangements so your home is clean and ready for you when you leave the hospital. While it may be a good idea to have some help with this, a professional cleaning company is not required. Do not start any major construction projects prior to or during your admission for transplant. These work areas can be dirty and are hard to keep clean. They often take longer than expected which may interfere with the timing of your discharge.

- **Follow-up care:** You will have follow-up appointments at Dana-Farber or with your local oncologist. As part of your discharge planning, an initial follow-up appointment will be made for you. These appointments are generally weekly (or 1-2 visits/week for allogeneic patients) for a period of time, and then transition to monthly or less frequently depending on your diagnosis, treatment, and recovery. We encourage your caregiver to accompany you to these follow-up visits.

Additional information is in the comprehensive guide and on the **patient education website:**

**<http://sctpatiented.dana-farber.org>  
password: dfci**