



ECHO Session Date: 2/28/26

Presenter Credential: PT, DPT, OncCS, CLT-LANA

Thank you for presenting your patient at ECHO Idaho –Cancer Survivorship.

Summary:

This 73-year-old Medicare-insured woman was diagnosed in August 2024 with Stage II multiple myeloma after worsening back pain during outpatient physical therapy prompted imaging that revealed diffuse lytic spinal lesions, compression fractures at T10 and L3, and multiple rib fractures in various stages of healing. She is undergoing active treatment with SBRT to rib, T10, and sacral lesions and induction chemotherapy with daratumumab, lenalidomide, bortezomib, and dexamethasone, and has significant comorbidities including osteoporosis, scoliosis, neuropathy, asthma, PTSD, and anxiety, contributing to increased fracture risk, reduced activity tolerance, chronic pain, poor sleep, and functional decline. She lives in a rural setting one hour from Boise with her granddaughter and great-grandchild, serves as their primary financial support, and has been unable to work since August in her physically demanding role as a restaurant cook, creating substantial financial stress and uncertainty about retirement or alternative employment. Functionally, she can drive but has balance concerns, limited standing tolerance, difficulty with bending, household tasks, and sleep due to pain and spinal deformity, and reports fear of falling despite no prior falls. She has limited social supports outside her family, a history of adverse childhood events, no advance directives or survivorship care plan, and is currently connected to social work, integrative oncology, rehabilitation therapies, palliative care, mental health support, and financial navigation, with goals focused on safely returning to work and maintaining independence in driving and home care.

Question:

How best to support this patient with the physical, emotional, vocational and financial challenges associated with her diagnoses given her living situation?

Good work supporting this patient who is already connected to multiple supportive services—including social work, cancer rehabilitation, integrative oncology, palliative care, mental health support, and financial navigation—demonstrating proactive, team-based care.

After review of the case presentation and discussion of this patient's case among the ECHO Community of Practice, the following suggestions have been made:

Care Coordination & Coverage

- Continue intensive social work involvement to coordinate resources, benefits, and applications.
- Prioritize Medicaid approval while continuing interim financial and caregiving supports, recognizing approval timelines may be prolonged
- Continue disability application process (SSDI/SSI).
- Explore case management through insurance/Medicaid once eligibility is established.



Financial & Practical Support

- [FindHelp](#) is a directory of nationwide and local resources for food pantries and meal programs near you. You can also find housing, financial assistance, health care, and more.
- Maintain use of hospital financial assistance programs (currently covering medications).
- Refer to financial advocacy and counseling resources for non-medical debt:
 - The [National Foundation for Credit Counseling](#) is a free service and can help with credit counseling, debt management, and bankruptcy
 - [Cancer Care News](#) has articles and resources to help address financial struggles.
- Continue access to food banks, and assess eligibility for SNAP (food stamps).
- Utilize gas cards and transportation assistance where available.
- Monitor and apply to blood cancer-specific financial aid programs as funds reopen.
- Consider [American Cancer Society Road to Recovery](#) for transportation support.
- Explore [Cleaning for a Reason](#) for home assistance, if available in her area.

Mental Health & Emotional Support

- Therapy, support groups, or oncology social work counseling may be more immediately accessible while psychiatry is pursued.
- Potential support groups include:
 - Diagnosis-specific (e.g., myeloma support groups)
 - Virtual or hybrid options to reduce access barriers

Rehabilitation & Functional Support

- Consider referral to Occupational Therapy for:
 - Energy conservation strategies
 - ADL support
 - Home safety assessment
 - Return-to-work or role-transition planning
- Explore vocational rehabilitation to assess options, without presuming return to physically demanding work
- Consider dietitian referral to support:
 - Budget-conscious meal planning
 - Nutrition to support treatment tolerance and quality of life

Pain & Symptom Management

- Continue close monitoring of pain regimen, with attention to:
 - Communication between oncology, primary care, and any pain clinic
 - Reassessment if pain does not improve over expected healing timelines
- Address medication safety in the home:
 - Consider lockboxes or medication safety tools
- Emphasize shared decision-making as well as the balance of safety and independence when discussing driving while on opioids, using individualized risk assessment.

Palliative Care

- Consider palliative care referral, including:
 - Evaluation for home-based palliative care, especially given rural location
 - Symptom management, psychosocial support, and care planning
- Clarify how palliative services interact with insurance and outpatient care.

Long-Term Planning

- Emphasize early and sustained use of support services, recognizing the chronic nature of her cancer and that financial, functional, and caregiving needs are unlikely to fully resolve.



ECHO Idaho: Cancer Survivorship CASE RECOMMENDATION FORM

- Revisit feasibility of return to work realistically, given fracture risk, fatigue, and disease trajectory.

Medication Safety / Lockbox

- Resource for Free Prescription Lockbox in Idaho: [Central District Health](#) (to access from their main website: Health > Prevention and Special Programs > Drug Overdose Prevention Program > Prescription Disposal > Request a free prescription lockbox)